

Position Paper on the Right to Sign Language for Families of Deaf Children

International Sign version



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Key points

- Deaf children have the right to sign language, and realising this right is essential for the achievement of their right to education, health and wellbeing. Article 5 of the WFD Declaration on the Rights of Deaf Children recognises deaf children's right to grow up in language-rich, multilingual signing environments. As 95% of deaf children are born to hearing families, their language rights are enabled through the provision of sign language support to both children and their families/carers from birth.
- When health care and early intervention and education services fail to provide accurate and comprehensive information to families and carers of deaf children about sign language and fail to provide opportunities to learn it, this constitutes a breach of families/carers' rights and deaf children's right to sign language.
- Article 25 of the Convention on the Rights of Persons with Disabilities (CRPD) requires States Parties to provide quality early intervention services to deaf children to minimize and prevent further disabilities, such as language deprivation that occurs when deaf children are denied access to sign language while not being able to effortlessly access spoken language during their critical language learning years (from birth to approximately five years old). Article 23 of the CRPD clarifies that early comprehensive information, services and support must be provided to children with disabilities and their families.
- Families and carers of deaf children should be supported in reaping the benefits of multilingualism for their deaf child and be provided with unconditional access to publicly funded, deaf-led sign language services and specialized sign language classes from infancy onwards.



 Deaf professionals and deaf role models play a pivotal role in supporting families and carers' right to sign language by enabling access to the national/Indigenous sign language and sign language resources and promoting the deaf community's linguistic and cultural identity.

Introduction

The World Federation of the Deaf (WFD) is concerned that the right to sign language is recurrently being breached by national government policies for newborn hearing screening and detection and early intervention services that exclude the opportunity for families and carers of deaf infants and children to be informed about the benefits of their national/Indigenous sign languages and to receive support to learn and communicate in the national/Indigenous sign language(s) in addition to the written/spoken language of their country.

About 95% of deaf children are born to parents who can hear¹ and whose primary language is the national/Indigenous spoken language. Often, families and carers are not informed of the existence of their national/Indigenous sign languages or deaf communities. The WFD's vision is "A World Where Deaf People Everywhere Can Sign Anywhere," and its mission is to realise the human rights, linguistic rights, and self-determination of deaf people and deaf communities. These rights begin with a language that is fully and effortlessly accessible to deaf babies and infants². This language is the national or Indigenous sign language/s of the surrounding community.³

The WFD's Declaration on the Rights of Deaf Children⁴ recognizes the right of deaf children to acquire and use sign language, to learn the linguistic identity and culture of the deaf community, and to be protected from language deprivation and its associated disabling developmental consequences as well as any infringement of children's right to sign language. Moreover, all parents, carers, and family members of deaf children must be provided with free instruction in their national/Indigenous sign language(s). The WFD strives for the achievement of the right to sign language for any deaf child in the world as a health need to prevent

¹ Hall, M. L., Hall, W. C., & Caselli, N. K. (2019). Deaf children need language, not (just) speech. First Language, 39(4), 367-395. https://doi.org/10.1177/0142723719834102

² Murray, Joseph J. PhD; Hall, Wyatte C. PhD; Snoddon, Kristin PhD. The Importance of Signed Languages for Deaf Children and Their Families. The Hearing Journal 73(3): p 30, 32, March 2020. | DOI: 10.1097/01.HJ.0000657988.24659.f3

³ The WFD uses the wording "National sign language" and "Indigenous sign language" instead of "sign language" to ensure that governments and relevant parties address the right of deaf people to the sign language(s) used in their country/region/Indigenous community.

⁴ https://wfdeaf.org/rightsdeafchildren/



language deprivation and communication neglect as evidenced in the WFD's Position Paper on Access to National Sign Languages as a Health Need⁵.

Moreover, the WHO World Report on Hearing recognises the benefits of early access to sign language for deaf infants and children and provides good practice examples of early intervention services provided to families/carers of deaf children with the intervention of deaf role models⁶.

However, in most countries, newborn hearing screening and detection and early intervention services do not include the provision of accurate and comprehensive information about national/Indigenous sign languages or support for learning sign languages. This is a violation of deaf children's right to sign language as outlined in the CRPD and other human rights instruments.

This position paper outlines the legal framework and issues, and provides recommendations for governments and service providers to fulfill the right of families and carers of deaf children to sign language.

International legal framework

Deaf children are both disability rights and linguistic minority rights holders. They belong to the group of persons with disabilities and to the deaf community that identifies as a cultural and linguistic minority.⁷ The present paper will address both perspectives as outlined in the UN Convention on the Rights of Persons with Disabilities (CRPD) and in other international human rights instruments.

The UN CRPD explicitly recognises the fundamental human rights of deaf individuals, including deaf children, and the importance of national and indigenous sign languages in enabling their participation in society⁸. States Parties to the Convention are required to undertake measures to ensure the implementation of these provisions, read conjointly with the other provisions of the Convention. Article 7 of the CRPD states that in all actions concerning children with disabilities, the best interests of the child shall be a primary consideration and that States

⁵ WFD, Position Paper on Access to National Sign Languages as a Health Need, December 2022, available at: https://wfdeaf.org/news/position-paper-on-access-to-national-sign-languages-as-a-health-need/

World Health Organization, World Report on Hearing, available at: https://www.google.com/url?q=https://www.who.int/publications/i/item/9789240020481&sa=D&source=docs&ust=1714383341081073&usg=AOvVaw1-mDFs2kk2clQ00Ns8kkHC

⁷ WFD Position Paper on Deaf Community as Linguistic Identity or Disability, http://wfdeaf.org/news/resources/wfd-position-paper-complementary-diametrically-opposed-situating-deaf-communities-within-disability-vs-cultural-linguistic-minority-constructs/

⁸ These rights are especially evident in Articles 2, 9, 21, 24, and 30 of the CRPD.



Parties to the CRPD shall ensure the full enjoyment by children with disabilities of all human rights and fundamental freedoms on an equal basis with other children. Under the application of Articles 21(e) and 24.3(b) of the CRPD, read conjointly, deaf children have the right to learn sign language and for their sign language to be recognised as an official language in their country. This means deaf children have the right to use sign language in their interactions and access to information, and to develop their linguistic and cultural identity.⁹

Article 8 requires States Parties to the CRPD to raise awareness at the family level regarding persons with disabilities and to foster respect for the rights and dignity of persons with disabilities. Article 23.3 requires States Parties to the CRPD to ensure that children with disabilities and their families are provided with early and comprehensive information, services, and support as part of their right to family life on an equal basis with others. Finally, and most importantly, Article 25 (b) of the CRPD mandates States Parties to provide quality early identification and intervention to persons with disabilities, including children, and services to minimize and prevent further disabilities. In the case of deaf children, the risk of language deprivation and associated consequences can be prevented by the timely provision of sign language services to children and their families/carers.

When undertaking those measures, States Parties are required to meaningfully engage with the Organizations of Persons with Disabilities,¹⁰ including National Associations of the Deaf, and should "closely consult with and actively involve" deaf persons through their representative organisations as enshrined in Article 4.3 of the CRPD.¹¹

In regard to the rights of deaf children and their families and carers to sign language, the CRPD Committee, which is the United Nations treaty body monitoring the implementation of the CRPD, clarified the obligations of the States Parties to the CRPD in the Concluding Observations in several countries. States Parties must recognise the right of all deaf children and their families and carers to learn and communicate in sign language¹², and to participate in deaf culture¹³, and they must take effective measures to promote sign language in their interactions¹⁴. Concretely, States Parties are required to set up mechanisms, allocate resources and provide funds for families and carers of a deaf child to learn sign language¹⁵.

⁹ CRPD Committee, Guidelines on treaty-specific document to be submitted by states parties under article 35, paragraph 1, of the CRPD.

¹⁰ To be distinguished from "Organisations for Persons with Disabilities" and "Civil Society Organisations", see CRPD Committee, General Comment N°7, par. 13 and 14.

¹¹ CRPD Committee, General Comment N°7, par. 21.

¹² CRPD/C/SAU/CO/1, para. 12.

¹³ CRPD/C/FRA/CO/1, para. 16.

¹⁴ CRPD/C/DNK/CO/1, para. 45.

¹⁵ CRPD/C/FRA/CO/1, para. 16, and CRPD/C/GBR/CO/1, para. 47 and 49.



The Convention on the Rights of the Child (CRC) Committee made similar recommendations to States Parties to the CRC as it required them to recognise the right of all deaf children to learn and communicate in the national sign language¹⁶, and thereby to allocate sufficient resources for the implementation of the national sign language legal instruments that are recognising the linguistic rights of deaf children and their families and carers¹⁷.

Under the application of Article 23 of the CRC on the rights of children with disabilities and their families and carers to early intervention, the CRC Committee has stated that it is in the best interests of the child to be cared for and nurtured within their own family environment if the family is adequately provided for in all aspects¹⁸. The support States Parties to the CRC should provide to families and carers of deaf children includes education in the family's language, including sign language so that deaf children can reach timely developmental milestones and effectively communicate with their family members and carers¹⁹. This right aligns with Article 30 of the CRC, which states that a child belonging to a linguistic minority, among other minorities, shall not be denied the right, in community with other members of his or her group, to enjoy his or her own culture and to use his or her own language.

The CRPD and CRC, whose implementation is monitored by their respective treaty bodies, provide a clear framework on the linguistic rights of deaf children and their families to receive comprehensive information from early intervention services about sign language and to have the opportunity to learn and communicate in the national/Indigenous sign language, which States Parties to the covenants are required to protect, respect and fulfill.

Deaf children's right to enjoy their own culture and use their own language is also encompassed by Article 27 of the International Convention on Civil and Political Rights (ICCPR) and further described in the Declaration on the Rights of Persons Belonging to National or Ethnic, Religious and Linguistic Minorities: "States should take appropriate measures so that, wherever possible, persons belonging to minorities may have adequate opportunities to learn their mother tongue (...)²⁰" Since deaf persons are recognized as members of linguistic minorities by the Forum on Minority Issues and by the Special Rapporteur on Minority Issues, Member States to the United Nations should recognize deaf children as members of linguistic minorities and ensure that they are provided education in sign language²¹, including in their early childhood.

¹⁶ CRC/C/DNK/CO/5 para. 29.

¹⁷ CRC/C/IRL/CO/5-6 para. 27.

¹⁸ Committee on the Rights of the Child, General Comment N°9, para. 41.

¹⁹ Committee on the Rights of the Child, General Comment N°9, para. 41.

²⁰ Declaration on the Rights of Persons Belonging to National or Ethnic, Religious and Linguistic Minorities, Art. 4.3.

²¹ Human Rights Council, Recommendations of the Forum on Minority Issues, A/HRC/43/63, paras. 11, 23 and 24.



The CRPD, and the CRC, and other UN treaties whose implementation is monitored by their respective treaty bodies, provides a clear framework on the linguistic rights of deaf children and their families to receive comprehensive information from early intervention services on sign language and to have the opportunity to learn and communicate in the national sign language, which States Parties to the covenants are required to protect, respect and fulfill.

Issues

1. Newborn hearing screening and detection

Health care providers who conduct newborn hearing screening are often the first point of contact with the families and carers of deaf children. When a child is identified as deaf, the information and referrals families and carers receive is often confusing, incomplete and biased toward auditory habilitation and treatment²². This must be changed. Families and carers with a young deaf child are in great need of comprehensive information about sign language as a health and language need and resources and services provided to support learning of sign language²³. This information should be given to families and carers from the detection of hearing loss.

2. Early intervention services and deaf role models

Early intervention services for young deaf children and their families and carers, such as audiology, hearing technology, and speech and language services, are available upon referral to health care providers. The services provided largely focus on auditory habilitation and assistive technology, and generally exclude support and services for a deaf child's linguistic and cultural rights and their families and carers' needs for sign language support. Further, early intervention services often do not support interaction between families and carers and deaf communities. As currently designed, these services do not meet the needs of families and caregivers to full access to information. This can be remedied through the employment of deaf professionals in the field²⁴ and the creation of support networks involving deaf linguistic role models, such as

²² Lieberman, J., Mitchiner, J. & Pontecorvo, E. (2024). Hearing parents learning American Sign Language with their deaf children: a mixed-methods survey. Applied Linguistics Review, 15(1), 309-333. https://doi-org.ezproxy.lib.torontomu.ca/10.1515%2Fapplirev-2021-0120

²³ Lillo-Martin, D. C., Gale, E., & Chen Pichler, D. (2023). Family ASL: An early start to equitable education for Deaf children. *Topics in Early Childhood Special Education*, 43(2), 156-166. https://doi-org.ezproxy.lib.torontomu.ca/10.1177/02711214211031307

²⁴ Gale, E., Berke, M., Benedict, B., Olson, S., Putz, K., & Yoshinaga-Itano, C. (2019). Deaf adults in early intervention programs. *Deafness & Education International*, p. 1-22; and Rogers, K. & Young, A. (2011), Being a Deaf Role Model: Deaf People's Experience of Working with Families and Deaf Young People, *Deafness and Education International*, 13, p. 2-16.



deaf parents and carers of deaf children²⁵. Families and carers of deaf children who are in contact with deaf professionals and role models experience lower levels of stress and have higher confidence in raising their deaf children.²⁶

3. Informed choice and decision-making

In the early stages of a deaf child's language acquisition, families and carers are compelled to make critical decisions regarding cochlear implantation and auditory-verbal therapy, which are presented as single options while support for learning sign language is excluded.²⁷ Not providing sign language information and support means families/carers are not fully informed and thus deprives families of being able to make fully-informed decisions.

The lack of full information to support families' decision-making is problematic given the variable outcomes observed in deaf children who are given only spoken language and the unreliability of the cochlear implant as a standalone first language acquisition device. Families are not adequately informed of the developmental consequences that are associated with not providing deaf children with a sign language.

Deaf children thrive in a multilingual environment which includes sign language and in a national spoken/written language.²⁸ Growing evidence strongly suggests cochlear implant outcomes are markedly better in multimodal-multilingual deaf children. Therefore, families and carers must be supported in reaping the benefits of multilingualism for their deaf child.²⁹ Early intervention services must empower families and carers by providing comprehensive information and resources for learning sign language. The best interests of deaf children should be considered, and they should be granted the right to express their views in decisions made about them and those views should be given due weight in accordance with their age and maturity.

4. Deaf children and families' access to sign language

Due to a lack of early, comprehensive information and support for families and carers of deaf children to learn sign language, deaf children are at a significantly higher risk of experiencing language deprivation and communication neglect. Language deprivation and communication

²⁵ Hamilton, B. and Clark, M. (2020) The Deaf Mentor Program: Benefits to Families. *Psychology, 11*, 713-736. https://doi.org/10.4236/psych.2020.115049

²⁶ Hintermair, M. (2006) Parental Resources, Parental Stress, and Socioemotional Development of Deaf and Hard of Hearing Children, *Journal of Deaf Studies and Deaf Education*, *11*, p. 493-513.

²⁷ Snoddon, K., and Paul, J.J. (2020), Framing Sign Language as a Health Need in Canadian and International Policy, *Maternal and Child Health Journal*, 24 (11), p. 1360-1364.

²⁸ Wilkinson, E., & Morford, J.P. (2020). How bilingualism contributes to healthy development in deaf children: A public health perspective. *Maternal & Child Health Journal*, *24*, 1330-1338. https://doi.org/10.1007/s10995-020-02976-6

²⁹ Kushalnagar, P., Mathur, G., Moreland, C.J., Napoli, D.J., Osterlind, W., Padden, C., & Rathmann, C. (2010) Infants and Children with Hearing Loss Need Early Language Access, *The Journal of Clinical Ethics*, *21*, p. 143-154.



neglect severely impact deaf individuals' health, education, and well-being.³⁰ Families and carers often face issues finding free sign language classes, support with taking time off from work and/or care responsibilities, and finding resources to support their learning of sign language. Deaf children and their families and carers should be provided with access to publicly funded, deaf-led sign language services and specialized sign language classes for families and carers.

Recommendations to State Parties

- Recommendation 1: Recognise that national/Indigenous sign languages are a health need and a right for deaf children and their families/carers from early childhood onwards, and undertake the necessary measures to implement this right in the national/regional legislation, policies and public services.
- Recommendation 2: Develop national government policies, programs and support systems ensuring the provision of free sign language courses to all families and carers of deaf children in early intervention and facilitating their participation through insurance schemes covering their work and/or care responsibilities.
- Recommendation 3: Provide training to health care providers and early intervention services on the importance of sign language in early childhood, build their connections with deaf communities, and ensure they are equipped with the necessary tools and resources to support families and carers and their deaf child in their ongoing sign language development.
- Recommendation 4: Facilitate, enable and support the involvement of deaf
 communities and deaf professionals in the health care and early intervention services
 by ensuring deaf professionals and educators are part of first-response teams,
 providing deaf-led services and facilitating contact between families and carers of deaf
 children and deaf role models in the deaf community.
- Recommendation 5: Recognize the necessity of connecting health and education services aimed to guarantee optimal development for deaf children by prioritising, building, and nurturing multilingual, sign language-rich spaces that cater to the linguistic and cultural needs of deaf children and their families/carers.

WFD Position paper on Access to National Sign Languages as a Health Need, https://wfdeaf.org/news/position-paper-on-access-to-national-sign-languages-as-a-health-need/

8



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About the World Federation of the Deaf

The World Federation of the Deaf (WFD) is an international non-governmental organisation representing and promoting approximately 70 million deaf people's human rights worldwide. The WFD is a federation of deaf organisations from 136 nations; its mission is to promote the human rights of deaf people and full, quality and equal access to all spheres of life, including self-determination, sign language, education, employment and community life. WFD has a consultative status in the United Nations and is a founding member of International Disability Alliance (IDA).

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