



# Assessment through the ages

Ted Moore presents a view of how deaf children and ToDs have been assessed over the years

I have chosen three types of assessment relating to deaf education:

## 1 The Teacher of the Deaf

### a Two questions from the NCTD Diploma Examination (1942):

- It is vital to the well-being of deaf children that they should be enabled to take their place in normal industry. What do you regard as the most important factors to ensure the attainment of this objective?
- What points should be considered in choosing a school desk for a deaf child? What harmful effects may unsuitable desks produce upon posture?  
(Source: *The Teacher of the Deaf Journal*, August 1942)

*My comment:* What now constitutes 'normal industry'? What sort of work are deaf school leavers now able to take on?

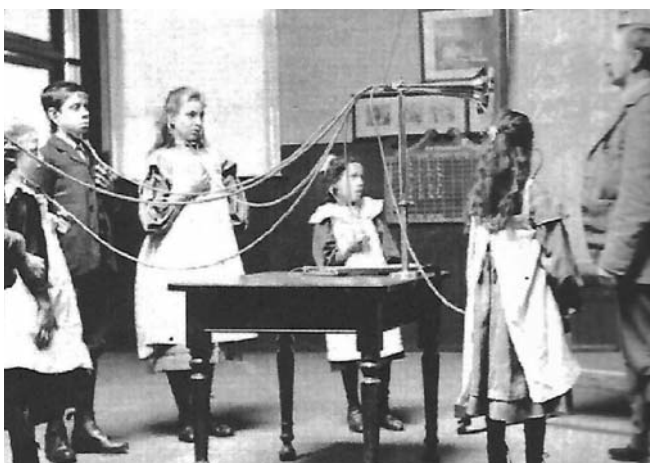
Have you ever had the opportunity to choose children's desks?

### b A question from the NCTD Diploma Examination (1949):

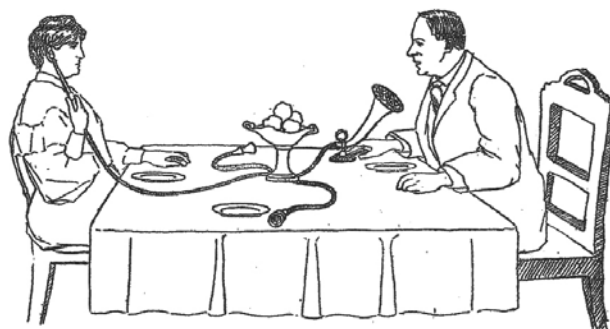
- Analyse and describe the methods that should enable senior deaf students to substitute correct pronunciation for habitual inaccuracies in their speech.

### c From the University of London Institute of Education Examination for the Diploma in the Teaching of Deaf and Partially Hearing Children (1966):

- Write short notes on three of the following:
  - Input, output and gain in hearing aids



*The teaching of speech about 1900. (From 'A Beginner's Introduction to Deaf History – Raymond Lee (Ed) 2004)*



- Harold's listening level\*
- Binaural listening
- Selective amplification.

\* Harold's levels were cited by Darcy Dale and were the product of a PhD study into 'The effect of variations in intensity on the capacity of deaf children and adults to hear speech with hearing aids'. He was involved in speech tests eg Kendall Toy test and M/J word lists.

### d From my own initial ToD course at London University (1973):

- Describe the welfare services that exist to help the hearing handicapped.

*My Comment:* I'm very sorry but I've forgotten what the answers might or should have been.

## 2 Assessment of the Causes of Acquired Deafness.

Manchester Schools for the Deaf and Dumb (1881)  
69 cases:

Scarlet fever – 15, Measles – 5, Meningitis – 7, Teething and convulsions – 7, Fevers (nature not stated) – 5, Disease – 6, Whooping Cough – 1, Uncertain – 17, Accident and falls – 2, Vaccination, sunstroke, inflammation, congestion, etc – 4.  
(Source:- *Deaf Mutism by James Kerr Love, 1896*)

Causes of deafness as recognised now:

- Hereditary disorders
- Genetic disorders
- Prenatal exposure to disease
- Noise
- Trauma
- Disease
- Other causes.

*My comment:* Note how many 'illnesses' and 'diseases' have now been largely eliminated i.e. whooping cough, measles, scarlet fever. In particular, I remember having many children in my classes who were deaf through rubella. The vaccinations that became available in the 1970s cut at least a third off the population of deaf children attending schools and units.



Teaching Speech and Listening in the 1950s

### 3 Assessment of Speech

In the past, probably pre-1970, the assessment of deaf children's speech was based on 'error analysis'.

For example:

Omissions: [kæ] for /kæt/ (cat),

Substitution: [dəʊ] for /təʊ/ (toe)

Distortion: [bi] for /bi/ (bee)

Addition: [sti] for /si/ (sea)

Most teachers would undertake lessons based on a whole class approach, which might have been of some help, but didn't take into account the differences of individuals' articulatory sound systems.

Sibley Haycock, in *'The Teaching of Speech'* (1933), states that one of the first principles in the teaching of speech should be:

*"Each class should have a programme of speech work designed to satisfy the expressive needs of its pupils and to implant them the habit of using speech freely for purposes of self-expression".*

But this involved teaching a whole class the same thing regardless of the capabilities or the system that individuals were using.

In the 1970s it became apparent that taking a sample of an individual's speech, then assessed in terms, not only of accepted norms, but of an individual's own system, was a much better and necessary way of enabling a child to expand on his/her ability to make contrasts between phonemes.



The outcome would be to assess a person's speech using a phonetically balanced word list and then identifying what sounds that person was making in initial, medial and final positions. What rules was the person using?

For example, for the word 'pea', a subject might say [bi] and for 'me' might say [bi] as well, thereby making no distinction between 'p', 'b' and 'm'. The result might be that the teacher/therapist would try to expand that particular person's system by working on the contrasts between the phonemes starting with them being used in initial positions.

*My comment:* Are ToDs 'teaching' speech articulation to deaf children anymore? Have the developments in hearing aid technology, including cochlear implants, and Newborn Hearing Screening made 'speech teaching' redundant?

**In conclusion:** Since ToDs set up a 'College of Teachers of the Deaf and Dumb' in 1885 and instituted a diploma as a qualification for membership, there have been significant changes in how deaf children are taught and supported. Over time huge changes have taken place with regard to attitudes, medical/health care, technology, teaching priorities and legislation.

All these factors have had a crucial impact on how deaf children have been assessed, with Newborn Hearing Screening and cochlear implantation being significant steps forward.

In educational terms the assessment of all children continues to be a debatable issue. However, it remains imperative that every deaf child is able to participate in society by being able to communicate effectively in the community in which they live. Only by individual and thorough assessment can this be achieved.

*Ted Moore is a former President of BATOD.*



*Ted Moore's Class at Hawkswood School 1974*

## **BATOD Magazine**

This article was published in the January 2017 issue.

© BATOD 2017

