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Abstract

This paper describes cross-cultural research methods that were used in a case study of a community college in the Midwest. During the course of the research, the importance of applying cross-cultural research methods became apparent. Analysis of the research process resulted in a identification of three aspects of cross-cultural design. These are the cross cultural research guidelines applied to Deafness, the context of the study, and the conduct of the research. The results indicated that when the interests of people who were Deaf were considered, cross-cultural collaboration was possible, there was benefit to the Deaf culture and the mainstream, and professionals who were Deaf were recognized.

Creswell (Creswell, 1998) has described culture as an “abstraction, something that cannot be observed directly” and that is comprised of “behaviors, language and artifacts” (p. 245). In order to conduct research across cultures, it is important for researchers to recognize the dual influences of the researcher’s culture and the culture to be examined, as well as the effects the research may have upon the culture in which the study is conducted. Additionally, the researcher must be ethical in the conduct of the study so that the potential risk of harm to the subjects is minimized (Maxwell, 1996). Cross-cultural research methods are used to examine “internal-proximal” constraints (e.g., personal values and beliefs) and “external-distal” constraints (e.g., social relationships) that are present across cultures (Bond, 1996). In recent years, cross-cultural research has grown in acceptance, as evidenced by textbooks (Lonner. W. J. & Malpass, 1994; Matsumoto, 2000; van de Vijver, 1997), the formation of the International Association for Cross-Cultural Psychology, and a handbook on this approach (Berry, 1997; Bond, 1996).

Pollard (Pollard, 1992) has argued that cross-cultural methods and practices should be applied when conducting research on deafness. To use cross-cultural research strategies, however, there must be acceptance of the
existence of a Deaf\(^1\) culture. The argument for a Deaf culture has been well articulated. There is a Deaf history (Gannon, 1980) and a deaf community, there are social organizations and shared experiences, social characteristics and language (Higgins, 1987; Wilcox, 1999). The concept of a Deaf culture is based on the notion that disability is socially constructed (Kroeger & Schuck, 1993); i.e., disability is defined by the relationship between the individual and the environment and is not a medical view of the loss of function. The environmental model of disability (Smart, 2001) includes Deaf culture. Membership in the Deaf culture is based on peer acceptance and not audiological diagnosis (Lane, 1993); that is, the individual chooses to self-identify as Deaf and has strong feelings of group identification (Woodward, 1982). The central argument for a Deaf culture rests on the use of American Sign Language (ASL) and the existence of other elements of any culture, such as cultural beliefs, values, rules for behavior, traditions, rituals and other attributes unique to a specific culture (Padden, 1989).

Pollard (1992) has pointed to “a gradient of cultural bearing” (p. 89) that places research on broad non-cultural issues, e.g., diseases of the ear at one end and cultural issues such as studies of ASL at the other. Most research will fall between these two extremes; the greater the cultural gradient, the greater the need for application of cross-cultural guidelines.

In a study (Sligar, 2002a) of the relationships of Deaf students, Deaf service providers and Deaf administrators with their hearing counterparts at a Midwestern community college and the institutional response to these relationships, it became apparent that the investigation was assuming a social/cultural perspective on deafness (Foster, 1996). Methods employed were interviews with representatives from each group and both formal and informal observations. Because the study had “identifiable but indirect implications for the deaf community” (Pollard, 1992, p. 88), the most ethical way to conduct the research was to use cross-cultural methods.

Pollard’s (1992) and Foster’s (1996) guidelines for the conduct of ethical cross-cultural research in Deafness were applied in the study. These guidelines were used to insure that the research corresponded to the priorities of the Deaf community and to ensure collaboration with Deaf people during the selection of the research methods; research development and progress review, and the dissemination of findings.

\(^1\) The use of capitalized Deaf refers to people who are culturally Deaf and the lower case deaf refers to the audiological condition of deafness (Padden, 1989).
Context

The research site was a Midwestern community college, which was located in a suburb of a large metropolitan area. The site was purposefully chosen because it presented an opportunity to examine a mainstream institution with an established program designed to serve students who were deaf or hard of hearing. The college opened its doors in the Fall of 1967 and in 1972 began offering services to three students who were Deaf. By 2001, the college had 220 full-time and approximately 600 part-time faculty, and an Office of Disability Support Services (DSS). In 2002 the DSS had 11 full-time administrative and staff positions, 3 permanent part-time staff and 36-45 part time positions. The full-time DSS positions included a full time coordinator of Services for the Deaf/Hard of Hearing with a program assistant, staff interpreter, counselor, interpreter coordinator, linguistics specialist, and instructor/career specialist. Part-time positions included 12-15 sign language interpreters and 8-10 student note takers. During the fiscal year 1999-2000, DSS served 536 students with disabilities, which included 29 students who were deaf or hard of hearing.

Conduct of the Research

Priorities of the Deaf Community

Given the existence of the Deaf culture within the mainstream institution, the researcher applied ethical cross-cultural guidelines. First, it was necessary to determine if the proposed research was aligned with the priorities of the Deaf community. The purpose of the study was to examine two issues of importance: access to postsecondary education and services that supported access. Both issues were in alignment with the goals of three national consumer organizations, the Association of Late Deafened Adults (ALDA), the National Association of the Deaf (NAD), and Self-Help for Hard of Hearing People (SHHH). All three groups advocate for opportunities for members to participate in postsecondary programs and for continuation of support services for access. This information can be found directly on the organizations’ websites (www.alda.org, www.nad.org, www.shhh.org) or in their publications (AldaCon conference proceedings, NADmag and NADezine, and SHHH’s Hearing Loss Journal). The goals are communicated indirectly through the advocacy work done by leaders and members.
One clear example is the support and involvement of these organizations and other consumer groups in the Postsecondary Education Program Network (PEPNet), a federally funded program. The mission of PEPNet is to improve postsecondary educational opportunities and access for persons who are deaf or hard of hearing through four regional outreach centers (PEPNet, 2001). One regional center is the Midwest Center for Postsecondary Outreach (MCPO), which serves the geographic region that includes the college. Representatives from the deaf community are included on advisory councils for each of the outreach centers.

The Research Methods

In order to explore the ways in which organizational supports were developed and maintained, a qualitative approach was chosen (Maxwell, 1996). The college under examination was a system with clear boundaries, a case study research design that utilized participant interviews and document reviews was selected (Creswell, 1998; Yin, 1994). The case study design also provided a way to examine a unique phenomenon, i.e., The college’s history of services to students who were deaf or hard of hearing.

The college’s DSS had strong links to professional service communities including a formal affiliation as an MCPO outreach site (MCPO, 1996). Through MCPO, the DSS improved its communication with the deaf community, which included both consumers and hearing and Deaf professionals, the MCPO Advisory Council (MCPO AC) and MCPO employees.

Administratively, the MCPO maintained a Coordinating Council (MCPO CC), which was comprised of outreach sites at Harper College in Palatine, IL, the University of Wisconsin-Milwaukee, the Center for Sight & Hearing in Rockford, IL and the home office at Saint Paul College—A Community and Technical College in St. Paul, MN. In the spring of 2000, the proposed research was submitted to the MCPO CC and the members provided review and feedback, which were incorporated in the design.

Ethical Issues

A main concern was confidentiality of the college’s services and the participants, which included the appropriate way to obtain informed consent. The college was a recognized exemplary program with a history of sharing service delivery techniques and procedures. This was evidenced
by their selection and willing participation as a MCPO outreach site, which continued the college's high profile in the field. Therefore, risk was slight for the college. Confidentiality and informed consent of the participants were of greater concern. The primary threat to confidentiality was the translation of Deaf participant interviews from ASL to spoken English. The Deaf community was a small one and there was only a limited pool of interpreters who were competent to provide sign to voice interpretation of the videotaped interviews. In order to ensure confidentiality, an interpreter with a Level 5 rating in Illinois, which indicates the interpreter is proficient or highly skilled (CAIRS, undated) was used. This professional was also bound by the interpreter's code of ethics. As a final precaution, an interpreter was selected who had never worked for the college or any of the participants. Informed consent of participants was obtained via a written form, which was also explained in sign language by the researcher. All of the Deaf participants were college graduates who were able to read and understand the form without difficulty.

Interviews

In qualitative research, the researcher serves as the primary instrument (Merriam & Simpson, 1995) and thus poses a potential threat to the trustworthiness of the data due to acknowledged or unintentional bias (Maxwell, 1996). Peer debriefings and member checks and a research journal with audit trail were used to reduce bias and insure trustworthiness of the data and analysis. Cross-cultural guidelines in deafness suggest that the researcher must demonstrate knowledge of deafness, including personal, social, medical and cultural aspects, and the researcher must be fluent in ASL (Foster, 1996). The researcher had over 30 years in deafness, and experience providing numerous program consultations to develop services for persons who were deaf or hard of hearing and association with many Deaf people as colleagues, co-workers and friends.

The researcher was a hearing person whose first language was spoken English. However, the researcher had taken classes in ASL, studied the grammatical features of ASL, and participated in the Sign Communication Proficiency Interview (SCPI) with a rating of Advanced. In addition, the researcher had previously interviewed hundreds of Deaf people about their careers and employment settings.
The primary source of data was through individual interviews with 17 participants; of these, four were Deaf and one was hard of hearing. All of the interviews followed a semi-structured format and were recorded. After transcription, the interview was returned to the participant for review and opportunity to clarify points or add information. For participants who could hear and understand English, the interviews were recorded on a microcassette. For participants who used ASL, the interviews were videotaped to ensure permanence of the interview (Bottorff, 1994) and to make sure there was time to analyze the signs to ensure accurate translation. Schuchman (Schuchman, 1993) designed a protocol to videotape persons who are Deaf in which there is a recorder placed behind the interviewer, facing the participant. He also suggested that the interviewer be recorded as well, but due to technical problems with this study the protocol was modified to record only the Deaf participant. In order to ensure that interviewer questions and comments were included, the interviewer used simultaneous voice and sign for short questions or statements and verbal summaries for longer statements.

To ensure accuracy of translation, both the researcher and the professional interpreter viewed the interviews. The interpreter voiced the Deaf participant’s statements into the microcassette. When disagreement on a sign occurred, the videotape was stopped and discussed until consensus was reached. Initially, discussions centered on sign names of people, buildings and classes that were unique to the college. One source of possible error was the fact that the interpreter was not from a postsecondary background. Thus, the sign for a person who helps others to learn was voiced as “teacher”, when participants referenced “instructor” or “professor”. The audiotapes were transcribed and then the researcher compared the transcription with the voice recording and compared it a second time against the videotape to ensure accuracy of both the interpretation and transcription.

**Progress Review**

At each of three MCPOCC meetings, the research was on the agenda with both formal progress reports as well as informal opportunities to discuss the research with colleagues. Additionally, MCPO AC members were formally apprised of the research through written communication and informally through individual contacts with the researcher. Deaf professionals who were not directly linked with the college or the study served as advisors on deafness related issues. In order to maintain perspective, two peer
reviewers who were not members of the Deaf community also participated (Pollard, 1992). Both were hearing researchers with deafness backgrounds. They provided comments on the importance of maintaining a bicultural perspective. One was also a qualitative researcher who provided feedback on the technical aspects of conducting a qualitative study. Peer debriefings (Creswell, 1998) were also provided by the MCPO AC.

During data collection and analysis, the research was presented at two national conferences (PEPNet, 2000 and ADARA, 2001) and one regional conference (Southeast Regional Institute on Deafness, 2000). The ADARA 2001 poster session was presented with a Deaf professional who was from the college and an MCPO colleague. These presentations provided hearing and Deaf professionals with opportunities to critique the research and make suggestions for change.

Specific input was sought on ways to ensure that the research was a fit with the Deaf community’s priorities; comments were requested on appropriateness and other areas for possible inclusion in the study. Most of the feedback was an affirmation of the fit of the topic with Deaf community priorities, the research method and the importance of the study to deafness. Suggestions were received to disseminate the findings to service providers both in the mainstream and deafness communities to enhance and broaden services. Administrators were also suggested as a target group for dissemination to develop further services and garner support for specialized programs for persons who are deaf or hard of hearing in their host institutions.

Dissemination of Results

Since the completion of the study in April 2002, the results have been presented at the following conferences or training programs: The National American Adult and Continuing Education Conference (AAACE), November 2002; The National Association for Higher Education and Disability (AHEAD), July 2003; The Biannual PEPNet Conference, April 2002 and 2004; ADARA, May 2003; Post-employment Training Program-Deafness (PET-D), June 2002 & 2003; and The Missouri Deafness and Rehabilitation Association (MoDARA), November 2002. These particular venues were selected because of the research fit with the mission of the organizations, i.e., mainstream postsecondary education (AAACE), mainstream disability service providers (AHEAD), hearing and Deaf
postsecondary service providers (PEPNet and special interest group in ADARA), national training program for administrators of deafness programs (PET-D) and grassroots Deaf professionals (MoDARA). The results were published in the 2002 PEPNet conference proceedings (Sligar, 2002b).

Results and Implications

This study applied cross-cultural guidelines in order to minimize risks to and increase the possibility of benefits for the Deaf community. Community representatives were included in the design, data collection, analysis, and dissemination phases of the research. The application of cross-cultural guidelines helped in several areas. For example,

- The interests of Deaf people were considered because the topic was specifically related to Deafness.
- The study demonstrated that cross-cultural collaboration was possible if the researcher took the time and effort to include and listen to Deaf people.
- New knowledge was generated to benefit Deaf people specifically and mainstream service providers in general.
- Professionals who are Deaf were recognized and included. These Deaf professionals served as the representatives of the Deaf culture and as participants.
- Results were disseminated to targeted groups.

Future research should include a Deaf person as co-investigator. This would serve not only to embed the interest of the community within the research but also to facilitate development of an emerging scholar in the conduct of research.

The need to define and refine ethical guidelines for the conduct of cross-cultural research is on-going. More researchers need to incorporate these ethical principles in the design of research and then reflect upon the importance, utility and degree of success of the design. Finally, research conducted within the Deaf culture needs to seek ways to ensure involvement of Deaf people to build a strong research agenda and empower Deaf people through involvement in the design of the research.
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