Deaf Cultural Capital and its Conflicts with Hearing Culture: Navigational Successes and Failures

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Cover Page Footnote
The research team would like to acknowledge Cris Nunn for his early contributions to the initial data collection for this project.

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Abstract

Despite the creation and implementation of laws intended to support and protect Deaf individuals, stories of limited opportunities and oppression within the workplace still exist and are pervasive. Current research in regard to Deaf individuals’ upward mobility includes a discussion of cultural capital, Imposter Syndrome, and navigational capital. To further understand the experiences of Deaf individuals, the research team conducted a mixed-methods study utilizing surveys and interviews. The results provided insight regarding challenges experienced by the participants in either-or-both their education and employment. The data suggests that the use of navigational capital was the most significant predictor for upward mobility.

Keywords: Deaf, Academics, Professionals, Navigational Capital, Barriers

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Deaf Cultural Capital and its Conflicts with Hearing Culture: Navigational Successes and Failures

With the implementation of the Americans with Disabilities Act (ADA, 1990), Deaf individuals gained more access to education and services, and became entrepreneurs (Luft, 2016; National Deaf Center, 2017). These advances are celebrated within the Deaf community; however, these celebrations are sometimes short-lived as Deaf people come into conflict with the social norms of hearing culture (Luft, 2016). Throughout this paper, Deaf culture refers to that of the Deaf community while hearing culture refers to hearing people – that lives in the United States.

Moreover, Deaf culture is visual-centric, and their interactions among members are typically direct: for instance, a Deaf employee casually mentioning changes in appearance to a hearing colleague may be considered offensive to the hearing individual. In hearing culture, such directness is uncommon and even considered socially unacceptable (see Table 1). Moreover, and often surprising for hearing people is the fact that Deaf people are sometimes loud, given that they may be unable to monitor their own volume level. This behavior violates the maxim of politeness in hearing culture (Pfister, 2010); a maxim that is not included within Deaf culture. Unlike hearing culture, Deaf culture utilizes loud noises for attention-getting behaviors, such as stomping one’s feet, banging on surfaces that create vibrations, and making loud vocal noises (see Table 1) to establish contact with another Deaf individual. As one can see, the pragmatics used within these two cultures differ and thus establishes the potential for conflict, especially between a hearing supervisor and a Deaf employee. This notable difference is based on the modality of language input used within each culture; hearing culture focuses on the auditory modality and therefore is sensitive to noise. In contrast, Deaf culture focuses on the visual modality, which is not sensitive to auditory noise (Humphries et al., 2012). These pragmatic and cultural differences lead to limitations, barriers, and discriminatory attitudes by the dominant hearing culture towards those who identify with Deaf culture (Holcomb, 2010). These limitations are expressed through negative attitudes and biases toward Deaf people that result in reduced social opportunities (National Deaf Center, 2017).

Table 1
American Deaf Culture vs. American Hearing Culture

<table>
<thead>
<tr>
<th><strong>American Deaf Culture</strong></th>
<th><strong>American Hearing Culture</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Farewell</strong> - prolonged farewells are considered polite. Short and abrupt departures are considered rude.</td>
<td><strong>Farewell</strong> - short farewells are typical in hearing culture. Long farewells are not common.</td>
</tr>
<tr>
<td><strong>Introductions</strong> - when introducing a person, it is considered acceptable and polite to provide background details and share personal stories.</td>
<td><strong>Introduction</strong> - when introducing a person, information is often limited to the person’s name and relation to the person doing the introduction.</td>
</tr>
<tr>
<td><strong>Eye contact</strong> - direct eye contact is considered polite. Lack of eye contact is considered rude and indicates a lack of listening.</td>
<td><strong>Eye contact</strong> - direct eye contact is acceptable for short periods of time, but extensive eye contact is considered rude or appears as if one...</td>
</tr>
</tbody>
</table>
Pointing - the use of pointing in ASL replaces pronouns. Pointing is also considered acceptable when discussing objects or people in the room.

Food in mouth - communicating with food in one’s mouth is not considered rude.

Money - discussion of money and salaries are considered normal.

Punctuality - punctuality is not typically expected. In fact, there is often a saying, *Deaf Standard Time*, to explain tardiness.

Personal questions - Deaf culture tends to ‘overshare’ as a means of getting information to understand the world around them and thus personal questions such as “how much weight have you gained”, “why did you get a divorce?” are considered normal.

Attention getting - Deaf culture relies on the visual modality, and thus attention getting behaviors cater to visual or kinetic sensory systems. Appropriate behaviors include tapping on shoulders, waving arms, stomping on the floor, banging on surfaces that create vibrations, and short loud verbal noises.

It is critical to understand that most Deaf children are born to hearing families (Mitchell & Karchmer, 2004) that have no knowledge of Deaf culture or how to raise a successful Deaf individual (Hamilton & Clark, 2020). Not only does this context mean Deaf children lack language models in the home, but it also frequently leads to Deaf children having limited access to language and communication. A lack of qualified and experienced professionals, such as early interventionists, audiologists, and medical doctors, who are culturally aware and can share culturally significant information with families, presents another challenge (National Deaf Center, 2017). As Deaf children age and prepare for the transition from school to work, inexperienced professionals working with this specific population tend to let explicit teaching of hearing culture fall by the wayside (Luft, 2016). Such professionals may not recognize the need to explicitly mention these potential conflicts, including Deaf cultural norms that are not typical of hearing culture, such as tapping on a table to get the attention of a Deaf individual, oversharing personal information, or often staying well past an event’s end, chatting with each
other. In contrast, hearing people demonstrate an audiovocal orientation in which they use their voices and sense of hearing to call for attention, limit information shared, and leave events in a timely manner (Cue, 2020). Like other people from dominant cultures, hearing individuals are unaware that they even have a culture; but they understand when their expectations are violated.

When the time comes for a Deaf individual to move from the context of school to work, a different set of cognitive behaviors is required (Hutchins, 2014). This transition requires negotiations that are delicate and complex, requiring the use of pragmatics. These pragmatic components tend to be taught from parent to child (Pellegrini, Brody, & Stoneman, 1987) through both direct and indirect instruction. An example is, “Do not pop your gum, it is impolite.” The action of “popping your gum” is considered inappropriate behavior because it causes a noise that hearing people typically find disruptive. Unfortunately, many hearing parents with Deaf children, as noted above, lack the necessary communication competence for such pragmatic lessons (Mitchell & Karchmer, 2004). A colleague shared his lack of understanding when his father told him to “pick up your feet.” (Hauser, 2004, personal communication); as a child, he had no idea why he needed to pick up his feet. His father was unable to effectively communicate that when he shuffled (rather than pick up his feet), it made a noise that his father found impolite. For those who grow up in a household without a common accessible language, such pragmatics are rarely taught, instead they are often ‘taught’ implicitly through conflicts in the workplace. Again, these pragmatics relate back to culture, which differs for those Deaf individuals who develop a Deaf cultural identity. Recall that Deaf culture differs in important ways from hearing culture (see Table 1.) These cultural differences between Deaf and hearing cultures can and do impact the social capital that a Deaf person acquires.

**Social Capital**

Social capital is comprised of moral obligations and norms, social values, social networks, and the relationships between people, conflicts, and power. Cultural differences require sensitive negotiations based on one’s cultural beliefs, goals, and norms (Adair & Brett, 2004); for example, women and men differ in how willing they are to negotiate salary in ambiguous situations (Leibbrandt & List, 2014). When it is not clear that wages are negotiable, women are less motivated to attempt salary negotiations than men. This phenomenon differs in cases where it is clear that the salary is negotiable, in which case women are equally motivated and willing to negotiate for higher salaries. Additionally, culture has an effect on what is considered appropriate and inappropriate in a negotiation. Given this cultural influence, Deaf individuals need intercultural competence in understanding how to negotiate within and through a hearing world (Antal & Friedman, 2008). These skill sets tend to require direct teaching and effective role models for those Deaf individuals whose families were unable to provide this type of social capital (Listman et al., 2011; Yosso, 2005).
Table 2

*Types of Capital and their Definition*

<table>
<thead>
<tr>
<th>Type of Capital</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social</td>
<td>Refers to a person’s personal and community networks.</td>
</tr>
<tr>
<td>Familial</td>
<td>Refers to the knowledge developed through the family pertaining to a person’s culture, history and community.</td>
</tr>
<tr>
<td>Linguistic</td>
<td>Refers to the knowledge and social understanding that is developed by using more than one language in communicative settings.</td>
</tr>
<tr>
<td>Community</td>
<td>Refers to the knowledge, skills, and abilities developed within minority communities.</td>
</tr>
<tr>
<td>Navigational</td>
<td>Refers to the skills of navigating through social, professional and academic settings.</td>
</tr>
<tr>
<td>Aspirational</td>
<td>Refers to a person continually working towards their dreams and goals, even when obstacles arise.</td>
</tr>
<tr>
<td>Resistance</td>
<td>Refers to the skills and understanding developed through opposing inequality in various settings.</td>
</tr>
</tbody>
</table>

Coupled with the lack of social capital is the struggle to find adequate employment as Deaf individuals’ employment rates are lower than their hearing peers (National Deaf Center, 2017). Those who are employed are often underemployed (Cawthon et al., 2016). Moreover, without effective social capital, it is difficult to navigate opportunities to develop collaborations, new projects, and obtain advancement (Cawthon et al., 2016). Examples of this type of synergistic interaction of being underemployed and lacking social capital happens in Rochester NY, a city rich in educational and Deaf cultural resources. Many Deaf individuals there with master’s degrees are employed overnight at the post office (Barnett, 2018, personal communication) instead of in professions related to their degrees, due in part to their lack of networks. In addition, individuals who are employed often report feelings of isolation and being left out in the workplace due to communication barriers and the lack of social capital with which they could overcome these barriers (Kurz et al., 2016).

**Social Capital from Role Models**

Another issue is that Deaf individuals often lack access to networks that provide social capital. One effective strategy for obtaining social capital is through knowledgeable role models who know how to negotiate a hearing reality (Holcomb, 2010). These role models are found in the Deaf community and may be Deaf themselves or hearing fluent signers who are frequently called “DEAF-KNOW” individuals (Braun et al., 2017). These role models have access to both formal and informal networks and can share their own personal and professional experiences. Deaf social capital is a bit different than Yosso’s (2005) model as familial and linguistic capital are combined into community capital. The rationale for this change is that most Deaf people are born into hearing families (Mitchell & Karchmer, 2004) that often are unable to share their own capital with their Deaf child. Therefore, these Deaf and DEAF-KNOW role models share Deaf social capital that includes four types of capital: community, navigational, aspirational, and resistance (Hamilton & Clark, 2020), as well as their knowledge of navigating the hearing community.
Within Deaf social capital, navigational capital is learning how to overcome challenges in the hearing world, such as how to navigate a university setting not built for people who are Deaf. Effective mentors who provide navigational capital (Listman et al., 2011) typically share how to manage difficult situations within the workplace and can share both Deaf cultural capital and hearing social capital. Aspirational capital from these role models can be gained from both within and outside of the Deaf community. Resistance capital is the inner grit and perseverance of an individual, knowing that other Deaf people have made it and that can as well. These four kinds of Deaf social capital are the keys to achieving success and permitting Deaf people to navigate stressful circumstances, and one of those difficult circumstances is the feeling of being an imposter.

**Imposter Syndrome**

Not only do Deaf individuals need to find Deaf social capital in non-traditional ways, they also often struggle with Imposter Syndrome. Clance and Imes (1978) coined the term *Imposter Syndrome* as individual experiences leading to chronic self-doubt and inadequate feelings regarding one’s self and one’s qualifications. Having possibly violated hearing cultural rules repeatedly, Deaf individuals frequently develop feelings of being an intellectual fraud in this realm. This syndrome is prevalent in the individual’s thinking, regardless of external evidence to the contrary. As noted by Clance and Imes (1978):

> Rooted in the ideologies of privilege and oppression, both phenomena ignite a sense of otherness and propagate the dominant metanarrative. Whether they feel as though they do not belong (i.e., Imposter Syndrome) or they feel as though they must prove they belong (i.e., stereotype threat), some marginalized groups are hyperaware of how they are othered, and this awareness influences how they navigate spaces. (pp. 19-20)

Feelings of inadequacy also are found in Edwards’ (2019) autoethnography in which she recounted her struggles in seeing herself as a scholar. Her experiences of Imposter Syndrome were directly related to a fear of failure. Thus, she redefined the word “scholar” to include failure as an “inescapable aspect of human nature…[and] an important antecedent for growth” (p. 30). She posited that while one has to accept their failures, one must also celebrate their successes.

On the note of accepting failures and successes, Deaf people seem to have Imposter Syndrome rooted in their past experiences, especially regarding written language. Written English is often difficult to master for many Deaf individuals who grow up language deprived. Often, it is not made clear to parents and society as a whole that the most accessible and comprehensible language for Deaf people is a visual and natural one, such as American Sign Language (ASL) for those living in the United States. ASL does not have a commonly used written form, nor does it follow English grammar and syntax (Hopkins, 2008). These differences often lead to insecurities in Deaf people, feeling that their written English is imperfect. These imperfections, if any, are internally attributed to common and typical Deaf-specific problem when it is, in reality, a result of language deprivation. This term, “language deprivation”, is used to describe the phenomenon in which an individual has a prolonged lack of full access to language during the first 5 years of
Language deprivation also has a neurological impact (Hall et al., 2017) that impacts all language learning (Pénicaud et al., 2013), thereby creating issues with learning written language. This struggle, in turn, magnifies feelings of inadequacy and further contributes to the Imposter Syndrome. Frequently, untrained hearing teachers who have never worked with the Deaf population do not understand the struggles Deaf children experience with becoming proficient in written language. These teachers typically over-criticize the Deaf writers while praising those who are skilled, leading to Deaf people’s internalized fears regarding their perceived English or other written language inadequacies. These experiences, in turn, adversely impact their use of social capital in the workplace. To better understand these feelings, our research team conducted a two-part study.

**Research Question**

The central question that guided this study stemmed from the current literature on factors that limit or impact upward mobility for Deaf adults. After reading the available literature and sharing personal experiences, the research team identified the following research question for this study: How does Deaf social capital impact a Deaf person’s ability to experience upward mobility in either an educational setting or the workplace?

**Methodology**

**Procedure**

Upon approval from the Institutional Review Board (IRB), participants were recruited through networking and social media, utilizing the snowball method (Creswell, 2013). Participants were provided with an informed consent form and invited to complete a survey that included questions to identify demographic information and questions (detailed below) in regard to how Deaf people navigated their academic experience and careers. The data from the survey allowed the research team to develop more targeted interview questions to gain a deeper understanding of the experiences Deaf individuals have when navigating academics and the workplace. The interviews were conducted in the participants’ preferred language and communication mode (ASL or SimCom—in which interviewers used both spoken English and ASL simultaneously).

**Setting**

**Survey**

This study was conducted electronically using an IRB-approved survey through Qualtrics. The survey consisted of 28 questions, with seven open-ended questions and 21 closed-ended questions. The entire survey included ASL translation videos, including the informed consent. Of those 28 questions, 11 asked for demographic information and three questions: 1) If they wore hearing aids or cochlear implants, 2) What their current primary language of communication was, and 3) Which family members were D/deaf, if any? The open-ended questions included pre-coded possible answers using language that was carefully chosen to minimize bias in the results (Kelley et al., 2003). The survey aimed to identify Deaf or hard of hearing participants who had experienced successes or difficulties advancing in their academic or professional careers.
Interviews

Each interview was conducted online using a video platform, such as Zoom. The interview was conducted in a semi-constructed manner with a list of predetermined questions to help guide the interview and reduce the influence of interviewer bias in participants’ responses (Kelley et al., 2003). The questions included information about the participants’ personal, educational, and employment background. Each question had several probes to identify each participant’s experience in regard to types of barriers they may have experienced. Additional questions asked about mentorships and support that the participants obtained in each part of their lives. Transcripts were converted to written English, and then all translated documents were deleted from all servers after the completion of the data analysis.

Participants

Survey Participants

Participants were invited to participate in the survey if they met the following criteria: (1) identified as D/deaf, hard of hearing, hearing impaired, late-deafened, DeafBlind, or deafblind, (2) were over 18 years of age, and (3) were currently in school, working, or both. The sample consisted of 79 participants, with one identifying as hearing for a final total of 78, including; women (n=26), men (n=48), transgender (n=1), prefer not to answer (n=2), and one missing data point. Participants then reported on their demographic characteristics. Participants identified their hearing status in the following ways: Deaf (n=59), deaf (n=10), hard of hearing (n=14), hearing-impaired (n=1), late-deafened (n=3), DeafBlind (n=2), and deafblind (n=1). Age was requested in intervals with participants responding as follows: 18-26 (n=13), 27-35 (n=33), 36-50 (n=38), and 51-75 (n=9). Race and ethnicity were reported as follows: African/American (n=7), Asian (n=1), European American (n=56), Latinx (n=7), and Middle Eastern (n=1). The participants’ reported their area of employment as: Liberal Arts (e.g. psychology, economics, social sciences, history, and philosophy: n=12), Science (e.g. chemistry, biology, pre-med: n=7), Law (n=1), Education (e.g. general education, Deaf education, special education: n=35), vocational/technical field (e.g. welding, cooking, hairdressing: n=6), others (n=8) while nine participants did not respond. In terms of work experience, most have worked between one to five years (n=27) but many had been employed for much longer (6-10 years: n=13, 11-15 years: n=15, and more than 16 years: n=10). Only eight participants had less than one year of employment. The educational background of the participants was reported as follows: certificate/diploma (n=1), some undergraduate college credits (n=7), associate degree (n=4), bachelor’s degree (n=19), some graduate college credits (n=8), master’s degree (n=26), terminal degree (n=3), some doctoral credits (n=9), and one missing data point.

Interview Participants

The interviewed sample consisted of 12 participants, including seven women and five men. Race and ethnicity of the participants were European American (n=7), African/American (n=3), Latinx (n=1), Asian (n=1) and ages of the participants were categorized as 18-26 yrs (n=2), 27-35 yrs
(n=6), 36-50 yrs (n=3), and 51-75 yrs (n=1). Educational backgrounds of the participants were reported as follows: Associate degree (n=2), some undergraduate college credits (n=1), bachelor’s degrees (n=1), some graduate college credits (n=1), master’s degree (n=1), some doctoral college credits (n=1), and terminal degree (n=1).

**Data Analytical Plan**

**Survey Data**

The data set was exported from Qualtrics into SPSS, analyzed using descriptive statistics, and reported as frequency counts. Responses that accounted for less than five percent of the results were either eliminated or combined with similar responses (e.g. participants were asked to self-identify their race and ethnicity. Responses such as ‘white’, ‘Caucasian’, ‘European American’, ‘white/Caucasian’ were combined). In regard to the open-ended questions, themes were identified, and individual responses were grouped under each theme identified through the interviews.

**Interviews**

The transcriptions were analyzed using a content analysis. Three research team members identified 14 themes from both the survey and the interview transcriptions. The team individually hand-coded the translations, then came together to discuss their coding strategies. After this round, coding resulted in an interrater reliability of 96%. The remaining four percent of the disagreements were resolved by consensus until there was 100% interrater reliability.

**Results**

Most participants from the survey and interviews felt that being deaf or hard of hearing either was a barrier or a potential barrier in their education and employment (see Table 3 for responses to questions discussed here). When asked questions about barriers in education, the majority reported experiencing them in both their educational settings and with vocational rehabilitation support. Importantly, only one-third of the participants reported having a mentor during their education. When asked about their careers, most wanted to advance but felt that they did not get support from vocational rehabilitation. In addition to the lack of support, most reported struggles with barriers at work, and were not provided with a mentor to help them move up (again refer to Table 3).

**Table 3**

*Results from Electronic Survey*

<table>
<thead>
<tr>
<th>Survey Question</th>
<th>Yes</th>
<th>Maybe</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you think being DHH is a barrier in your education and/or career?</td>
<td>49%</td>
<td>32%</td>
<td>18%</td>
<td>1%</td>
</tr>
</tbody>
</table>
Experiences in Education

Have you experienced barriers within the education setting?
- 68%
- 18%
- 12%
- 2%

While you were in school, did you receive VR support?
- 72%
- 27%
- 1%

Did you have access to a mentor while you were in school?
- 36%
- 10%
- 53%
- 1%

Experiences in the Workplace

Did you experience barriers within the workplace?
- 63%
- 22%
- 13%
- 2%

Are you interested in obtaining a higher position in your current career?
- 67%
- 26%
- 5%
- 2%

Did VR assist in your job search?
- 3%
- 9%
- 87%
- 1%

Did/do you have access to a mentor in the workplace?
- 38%
- 4%
- 55%
- 3%

Participants who reported experiencing barriers in either their education experiences or the workplace were asked to choose which, if any, strategies helped them overcome them, allowing for multiple answers. The top three strategies were support from friends and family (n=52), support from colleagues/classmates (n=45), and support from supervisors/teachers (n=43). The ability to advocate for themselves through knowledge of rights and laws was also reported as an important strategy (n=51). Additional strategies identified were the availability of professional and/or educational resources (n=36) and obtaining more training and/or education (n=30). The survey had an option to fill in additional responses to allow participants to elaborate on their experiences if they desired. When participants were asked to expand on specific barriers they faced, six themes were prevalent: communication as a barrier (n=21), oppression (n=7), English privilege (n=4), accommodations becoming a barrier (n=20), inability to move up (n=4), and isolation (n=3). In regard to strategies they used to overcome their barriers of the 79 participants’ open-ended responses, five themes emerged: accommodations (n=21), self-advocacy (n=28), grit (n=15), support (n=6), and acquiescence to the majority (n=4). After the survey data was analyzed, the research team developed a series of questions for follow up interviews with participants who expressed willingness to be contacted later. Next, themes identified from the interviews are discussed.

Table 4
Themes from Content Analysis of Interviews

<table>
<thead>
<tr>
<th>Themes</th>
<th>n=12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Isolation</td>
<td>12</td>
</tr>
</tbody>
</table>

https://repository.wcsu.edu/jadara/vol54/iss1/2
Different Identities 10
Avoiding Blame 3
Lack of Confidence 6
Oppression 11
Support 11
Pushing boundaries 8
Negotiating culture 12
Dominant identity 11
Shared experiences 10
"Why bother?" 4
Grit 11
Barriers 12

The codes that emerged with the highest $n$ were as follows: isolation ($n=12$), negotiating culture ($n=12$), barriers ($n=12$), oppression ($n=11$), support ($n=11$), dominant identity ($n=11$), and grit ($n=11$) (See Table 2). Several of the participants came from multiple identity backgrounds and reported a struggle to determine which identity was their dominant identity. This lack of a dominant identity led to many feelings of oppression for participants who had not yet developed the ability to self-advocate for their needs. The majority of participants reported experiencing feeling isolated and oppressed, and struggled find strategies to manage barriers they faced. The struggles they often reported were feelings of helplessness and limitations. The codes that appeared the least in the interview data were “why bother?” ($n=4$) and avoiding blame ($n=3$). These participants had internalized the oppression they experienced in the world and resigned themselves to a life of limitations.

It appears that the involvement of mentors, support, and an understanding of culture leads to a more comfortable journey for many of the participants. In particular, the interviews participants who attempted to navigate the academic and professional world showed that they benefitted from having guidance in understanding hearing culture. Such guidance came in the form of advice from colleagues, meetings with professors, or incidental information from their families growing up.

**Discussion**

The results of this study suggest that Deaf people often struggle with trying to navigate challenges in communication, beliefs, cultural differences and norms, as well as how to achieve goals in the hearing world. Often, Deaf people find that they unknowingly violate the maxim of politeness in hearing culture (Pfister, 2010). Such violations led to an imbalance in power, where hearing individuals frequently chastise Deaf people for not following rules that do not occur naturally in Deaf culture. These differences in culture, coupled with the fact that many teachers and supervisors in the workplace are hearing, lead to the belief that hearing people are superior to Deaf people. Within the Deaf community, these issues are often referred to as the Deaf tax; that is, Deaf people have to educate hearing people about their skills and abilities as well as the
accommodations that work for them (Cue, 2020). Similar to the “glass ceiling” (Cotter et al., 2001), Deaf people often need to break the “sound barrier” where they have to pass for hearing (Brune & Wilson, 2013) and adopt “hearing behaviors” to be successful. Given our phonocentric view of the world (Bauman, 2008) not being able to hear seems to be impossible to imagine and the hearing world often has a difficult time adapting to using visual types of communication. So again, the Deaf tax appears.

Additionally, the data showed that well-developed Deaf social capital, including navigational skills, is often what helps Deaf people to become successful in both educational settings and the workplace. Particularly, navigational strategies such as pursuing higher education, learning to advocate for oneself, and leaning on others for support, were effective. This result is especially true in regard to feelings of isolation, oppression, and navigating barriers that were reported by participants. It appears that when one has weak navigational or social capital, they may find themselves struggling with upward mobility within the educational setting or in the workplace.

Overall, the researchers found that participants were frustrated with oppressive issues that included communication barriers and isolation. These reports aligned with the current literature, which identifies difficulties with communication, inadequate training, and employer attitudes as obstacles for job attainment and retention (Perkins-Dock et al., 2015). For instance, one of the participants who worked in a Deaf environment mentioned that if there was a pill that they could take that would make them hearing, they would do so without question. They explained their reasoning, which was that they felt extremely limited in their current work environment in regards to upward mobility and envied hearing people’s flexibility to change careers or change locations. Another example of weak navigational capital was seen in another participant pursuing a degree in the medical field. They had completed all of the course requirements but were not able to graduate due to the fact that they were not allowed to complete the required clinical hours “due to deafness,” under the guise that incorporating an interpreter during the clinical component would violate patient confidentiality as established by the Health Insurance Portability and Accountability Act (HIPAA). The participant had invested time during coursework and hours of studies, becoming invested financially via student loans only to be unable to complete the degree. This participant’s story is an example of how society can limit Deaf people who have higher aspirations.

More research is needed given that situations such as those discussed above may not apply to all Deaf people. This study had several limitations, such as a small sample size and the distance between participants and researchers requiring the use of video technology for all interviews. There was also a limitation in that the survey allowed for several “check all that apply” questions, which posed issues determining which languages were preferred by participants as opposed to languages that were typically used in their environment. Other limitations were the type of questions asked in the interviews. In an attempt to be all-inclusive, the researchers did not ask questions regarding overlapping identities. Questions that allowed for an in-depth discussion on how different identities, such as gender and race, may have added rich data regarding Deaf people’s barriers in the different settings and their experiences with moving up beyond the “glass ceiling” imposed by society. Other research could explore the development of navigational capital as well as other forms of capital and their impacts on upward mobility for Deaf
individuals. Additionally, future research could explore the impact of overlapping identities (e.g. race and ethnicity) on upward mobility.

The results of this study show that higher education is not the only key to achieving upward mobility in education or the workplace, but also suggests that an understanding of hearing culture may be a more efficient predictor of a Deaf person’s ability to navigate the academic and/or professional world(s). For optimal outcomes, professionals in the field should be trained in strategies to increase Deaf children’s ability to navigate the differences between Deaf and hearing cultures. These training and strategies can be achieved by employing the use of mentors or services such as Vocational Rehabilitation services. Additionally, the use of federally funded centers such as the National Deaf Center can serve as a centralized location to obtain mentorship and trainings.
References


