Deaf with Cerebral Palsy

What is Cerebral Palsy?

Cerebral Palsy is a condition that is characterized by an inability to fully control motor function. It is involved in brain and nervous system functions that cause the obstacle of physical movement. Under IDEA, it is considered as a part of orthopedic impairment, that is a severe orthopedic impairment that adversely affects a child’s educational performance. (1) There are about 700,000 American citizens are diagnosed with cerebral palsy (2). Among the deaf community, the proportion of cerebral palsy in the population is more significant in comparison of their hearing counterparts. According to Gallaudet University studies, there are 1,439 deaf students with cerebral palsy out of 35,706 deaf students (1). That is 4% of whole deaf students have cerebral palsy while hearing students are only 2 to 3 in 1000 (3). There are current no treatment for cerebral palsy.

Cause

The cause of cerebral palsy is not fully understood by medical professionals. Cerebral palsy is caused by injuries or abnormalities of the brain. It happens when the baby grows in the womb, but they can happen at any time during the first 2 years of life, while the baby's brain is still developing. There are several possible causes for getting cerebral palsy by bleeding in the brain, brain infections such as encephalitis, meningitis, herpes simplex infections, head injury, lack of oxygen in the brain while in the womb (hypoxia), and infection in the mother during pregnancy such as rubella, and severe jaundice. Moreover, the cause of cerebral palsy is often undetermined. Premature infants are the highest risk at developing cerebral palsy due to their invulnerable brain development. (4)

Types

There are categories within cerebral palsy. The major of cerebral palsy are Spastic cerebral palsy, the most common group that causes muscle to stiffen to make movement difficult; athetotic cerebral palsy is the form that causes the whole body to be uncontrolled and slow movement; ataxic cerebral is the least common that affects balance and coordination. The symptoms within cerebral palsy are extreme varied from very mild to very severe; some of them are able to walk while others require wheelchairs. They are varied based on specific area of their nervous system functions in their bodies. The inability of hearing is one of the cause of cerebral palsy, so it is one of other factors why there is a large number of deaf people with cerebral palsy. (4)

Treatment

Although Cerebral Palsy is a lifelong disability, there are many treatments that are typically done in order to help individuals succeed. Individuals often attend physical therapy, occupational therapy and speech therapy. Depending on the severity of Cerebral Palsy, individuals may be in a wheelchair, have a walker or use orthotic devices such as braces. The purpose of these treatments are to improve mobility and motor skills as much as possible and to, at the same time, help the individual to compensate for any diminished motor skills to ensure the most able life possible.

Deaf with cerebral palsy

Since the Deaf population has significant population of cerebral palsy with 4% among of those deaf students in the states due to some of syndromes that cause both cerebral palsy and deafness, such as rubella and its disability causing the inability to hear. It creates challenges for deaf people with cerebral palsy because of the use of American Sign Language as their primary language while they have inability to control motor function especially with their arms and hands that this inability creates more severe barriers in their communication. According to the organization, cerebral palsy and deaf organization, Deaf people with cerebral palsy have been facing more severe obstacles with communication access in comparison of those deaf people without cerebral palsy because deaf people with cerebral palsy are not able to convey clear signing so others have difficult times to understand them. (5)

Cerebral Palsy and Deaf Organization (CPADO)

There is an organization in Gaithersburg, Maryland that is solely for deaf people with cerebral palsy. They promote their rights for their communication access. For instance, Mark Hill, the president of CPADO, had written a note to FCC to express the community of deaf people with cerebral palsy’s concern about incompetency access in video relay service because the majority of video relay service does not understand their signing due to their condition that is not able to control motor function fully. (6) Many of deaf people with cerebral palsy struggle to have proper access to video relay service due to their unintelligible signing skills. They feel frustrated because they have hard time to access to their legal and medical situations. This organization encourages promoting video relay service to establish specific interpreters who are expert with deaf people with cerebral palsy’s signing. (7)

Educational situation and strategies

The inclusion of deaf students with cerebral palsy in their education is often a major challenge in especially their ability to express themselves in sign language and writing. Due to impaired motor control, including hand movement, communication may be slow and require a great amount of effort. They can be very difficult to understand for professionals in order to assess them effectively. Teachers of the Deaf are obliged to create proper accommodations for deaf students with cerebral palsy depending on its severity, and they are required to have plenty of patience to understand their signing in order to convey more effective communication access for deaf students with cerebral palsy. (1)

Gallaudet University Studies have some suggestions to make accommodations for deaf students with cerebral palsy:

The following list includes some strategies for working with students who have cerebral palsy:

- Individuals with upper body limitations may need note takers, extended test times or assistance in recording answers
- An upper body weakness may make it difficult to the student to raise their hand to participate. You may want to establish a visual signal to indicate when the student wishes to contribute to the discussion.
Students may require additional time to change classes. Architectural barriers and personal limitations may make moving more difficult and slow. Sitting arrangements may include a lower table for writing, chairs with additional support and removal of architectural barriers to obtain full participation. Field trips and internships need to be reviewed beforehand to assure equal accessibility. (1)

References:
1) http://www.gallaudet.edu/clerc_center/information_and_resources/info_to_go/educate_children_(3_to_21)/students_with_disabilities/cerebral_palsy.html
2) http://codi.tamucc.edu/graph_based/demographics/statistics.htm
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