

Getting deaf children to participate in the social world

Anke van der Meijde and Evelie Wesselink describe their Theory of Mind training that offers a child program and, in parallel, a parent program in the Netherlands and Belgium for the social-emotional development of deaf children

In the past decades, we have seen major advances in the care of deaf people; this includes diagnostics, rehabilitation, and counseling. Examples include early detection and provision of Early Treatment Centers as well as the advanced technology of hearing aids and the possibility of cochlear implantation. There has also been an increased focus on the social-emotional well-being of deaf children. Yet studies show that deaf children are more likely to experience problems in terms of social-emotional development. They have more difficulties in participating in the social world, where communication is fast paced. This affects their connection with peers, while this is so important for self-esteem and emotional well-being.

The problems experienced appear to be related to a delay in the development of a Theory of Mind (ToM). ToM is the ability to attribute thoughts, feelings and intentions to oneself and others, and to adjust one's own behavior accordingly (Baron-Cohen, 2000). Cognitive developmental psychology is the frame of reference here; the premise being that social behavior is driven by (social) cognitive processes. Another term for ToM is 'social cognition'. It refers to a thinking process in which you gain insight into the behavior and intentions of others. This provides guidelines on how to understand and interpret social behavior. Deaf children have more difficulty putting themselves in the perspective of others. As a result, they are less able to attune to the behavior of others. This can be a barrier to participation in social life.

The cause of this delay originates in missing out on important social-interactive experiences. Deaf children have to make extra efforts to take in information from their surroundings. Sideways conversations that are not specifically addressed to them are missed. However, these moments of 'listening in' actually contain essential social learning moments. Examples include settling an argument, coordination between family members, or communicating moods. Through these conversations, children learn that there are different perspectives and that everyone can think differently about certain things. The interaction style of hearing parents towards their deaf child is also often unintentionally different. It is generally more directive and less rich in content and form than towards their hearing children. There is less discussion about motives or underlying thoughts and fewer emotive words are

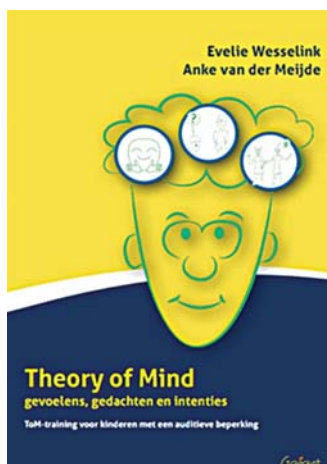
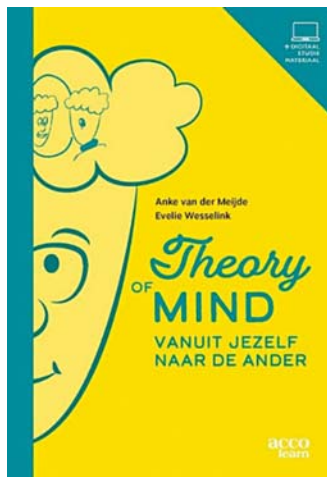
used. For example, 'I think, wish, feel, believe, hope'. This concerns a wide range within the target group, even children with moderate deafness miss a lot of important information because of the fact that it is passing them by, caused by problems with incidental learning.

Early guidance and intervention can reduce the likelihood of problems in the future. Thus, a positive course of social-emotional development is important for other areas of development. Attention, motivation, and memory capacity are better when children are feeling good. Therefore, it is very important to support deaf children in developing ToM skills from an early age.

Anke van der Meijde (Health care Psychologist), and Evelie Wesselink (Speech Therapist/Family Counselor) set out to fill a gap in the treatment offered to deaf children. They have developed a ToM training program for children with an auditory disability and published it in book form. Making the world of deaf pleasant and joyful has been the main motive for creating the treatment programs. Every child

needs contact and communication with others; conversations with peers and maintaining friendships give a sense of 'belonging'. From these feelings, it is possible to develop a positive self-image, which is essential for social well-being.

The ToM training offers a child program and, in parallel, a parent program. The authors see parents as an indispensable link in the child's development. When parents know how to encourage and support their deaf child at different stages of owning the ToM concepts, lasting change and improvement can occur. The training focuses on increasing understanding of oneself and others. This allows you to better understand the feelings, thoughts, and intentions of others making it easier to interact. The children's program contains a wide variety of playful and appealing exercises per meeting. These are described step-by-step and in detail. The training structure follows the normal ToM development. Self-awareness runs like a thread through the training. Before a child can take the next step, he must first know who he is himself. In the parent program, parents learn how they can provide targeted support for their child in everyday situations. Themes and activities of the child and parent programs are carefully coordinated. This promotes transfer to everyday situations.



Experiences with the training are positive. Children make visible progress and parents say they have more insight into seemingly obvious things that their child appears to miss in everyday life. This increases understanding of their deaf child and enables appropriate support. Children enjoy learning that 'everyone is different and thinks differently'. It also increases respect towards each other.

Anke and Evelie want to have both books translated into English to make ToM training available outside the Dutch-speaking area. In this way, they want to contribute to increasing the social well-being, and thus, the enjoyment of life, of many deaf children. To enable translation, they would like to get in touch with English-speaking professionals with an interest in this area of work.

Anke and Evelie are the authors of the books:

'Theory of mind – gevoelens, gedachten en intenties.

ToM-training voor kinderen met een auditieve beperking in

de leeftijd van 9–12 jaar' (2019). (Translation: 'Theory of mind – feelings, thoughts, and intentions. ToM training for deaf children aged 9–12').

'Theory of mind – vanuit jezelf naar de ander. ToMmie-training voor kinderen met een auditieve beperking in de leeftijd van 5–8 jaar' (2022). (Translation: 'Theory of mind – from yourself to the other. ToMmie training for deaf children aged 5–8').

The books include ToM training for deaf children of primary school age. This constitutes the first complete treatment offered in the Netherlands and Belgium for the social-emotional development of deaf children.

Evelie and Anke offer training to professionals in the Netherlands and Belgium on ToM in deaf children. In this way, they hope to increase knowledge and skills on the subject, giving more children the opportunity to make use of the ToM treatment offered in their own environment.



Anke van der Meijde is a Healthcare Psychologist and currently works at Pento Zwolle, Netherlands, as a ToM specialist. In her career, she has gained extensive experience in diagnostics, counseling and (group) treatment of deaf children. Her expertise lies in the field of social-emotional development of this target group a.vandermeijde@pento.nl

Evelie Wesselink works as a Speech Therapist/Family Counselor at Pento Vroegbehandeling Zwolle, Netherlands. After completing her training in speech therapy, she specialized in the treatment and guidance of young children and their parents. She is an intensive family therapist and is certified as a trainer for video home training, a program based on short-term, home-centered filmed video-feedback of family interaction. She has also developed expertise in the social-emotional development of deaf children e.wesselink@pento.nl

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The animations for all the resources have been translated into British Sign Language and subtitles to make them more accessible

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