

Review of: "The Noisy Silence of Deaf villagers of Dhadkai, Jammu, India: A Case Study"

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Summary

The article, **The Noisy Silence of Deaf villagers of Dhadkai, Jammu, India: A Case Study**, written by Dr. Sunita Joshi Kathuria is a descriptive study and call to action for both the medical and educational services supporting extremely rural areas of India. The village of focus Dhadkai Village, is a rural village, mainly supported through agricultural, pastoral, and nomadic work. There is a strong genetic prevalence of congenital deafness and an extreme isolation from educational services due to the prevalence of deafness. Findings indicate that the population of deafness has increased with the lack of genetic diversity- a common theme in isolated communities. The author provides figures and images that provide the reader with a sense of location, community structure, village, and the people. The narrative draws a reader to be both empathetic and advocating for the population, which seemingly has received no governmental supports for education, employment, and interventions. A multi-need call for action outlines future steps.

Call To Action

The call to action, listed in findings notes several needs:

Community Rehabilitation & Vocational Training

Academic interventions

Counseling & Therapeutic Interventions

Language & Amplification Interventions

Disability Pension

Critique

The addition of pictures adds to the power of your argument. As a reader, these images draw me in and awaken a sense of urgency to serve this population. My critique is that I would love descriptions of the pictures, especially those that show the people and places of Dhadkai. I want the complete emotional understanding of the people through understanding of the context of these powerful images.

The lexicon in this manuscript deviates from norms of the broader deaf community by using terms such as “deaf and dumb,” “hearing problems,” and “suffering from hearing impairment.” A change in terminology to fit the norms of deaf studies is suggested. Such terms such as “deaf and hard of hearing,” “person with hearing loss,” “deaf, non-speaking” would be preferable. Likewise, the language used in the “emotional trauma” finding, describing deaf people as “defective” and “undesirable” is very ableist, though likely appropriate for cultural norms.

I encourage you to consider the importance of the natural sign language that has developed within this region. While you have emphasized the need for the development of the national sign language, the indigenous language of the people is a cultural asset. I fear that without documentation of the native sign language of the village, it may become an extinct dialect, much as happened with the Martha’s Vineyard language in the United States.

I encourage you to continue to document and advocate for this population. I recommend consideration of the Martha’s Vineyard colony, as well as the Nicaraguan Deaf who spontaneously created Nicaraguan Sign Language due to their isolation and need for language. Likewise, I encourage you to explore the complexity of the Dhadkai sign language, as many natural sign languages are more complex than outsiders to the language can understand. I hope through educational interventions, that you may both be a preserver of this language, as well as a support to allow this language to grow.

As this population is isolated, I highly encourage you to continue to support the community from within. The education of the surrounding population to understand this as a marginalized community and not as an undesirable and defective population is critical to the rehabilitation and education of these people. Likewise, as your efforts to serve this community are felt in your description, I look forward to reading how this community develops, especially as it can be built from within.