“Well, It Is Complicated …”

The quote above, used by Marc Marschark to start off his forward to this book, aptly summarizes working with deaf children and the difficulties of writing about that work. Edwards and Crocker have taken on the daunting challenge of reviewing and summarizing the literature on the development of deaf and hard-of-hearing children with the goal of providing “evidence-based” guidelines. Furthermore, they have attempted to make the book appropriate for professionals in mental health and education as well as parents and families. This requires a rather delicate balance. Edwards and Crocker may teeter from time to time but never completely fall.

The book is divided into eight chapters, one introductory overview of the “experience” of childhood deafness, five that cover specific developmental disorders or difficulties, one on cochlear implants and a last chapter on professional issues. Edwards and Crocker live and work in the United Kingdom, so the professional issues are most pertinent to that country but do have relevance to others. In each of the “disorders” chapters, the authors seek to present what is currently known about the disorder in deaf children, any formal data on assessment and intervention approaches, the implications for professionals working with deaf children and the parents of these children, as well as occasional case descriptions. The literature reviews are fairly comprehensive, and they cover cognitive, social/emotional, and developmental difficulties. Additionally, one chapter is devoted to tinnitus, a pervasive and potentially troubling symptom that is not frequently covered.

While reading this book, our limited knowledge base becomes all too apparent. Edwards and Crocker set out to use evidence to guide their recommendations. Yet, what they are forced to say far too many times is that data are limited, and we really do not know answers to many questions. Recommendations offered, as the authors note, often are not based on well-controlled studies but on clinical experience. Given the difficulty of doing large-scaled outcome studies with deaf children, it is not likely that the field will see a quantum increase in our understanding of the complexities of development in deaf children. But, as a researcher, reading Edwards and Crocker’s work reaffirms the need to focus energy on learning all we can from the growing number of smaller studies (reviewed thoroughly in this book) that are building, ever so slowly, the needed evidence.

The path Edwards and Crocker chose is not an easy one. At times, the recommendations or therapy descriptions may seem self-evident to professionals or research methodology not described with much depth. However, the descriptions of the various studies may not be as easily followed by nonmental health professionals. The authors also try to address the entire range of children with hearing loss, from those who identify with Deaf culture and use sign language to those with cochlear implants. This requires careful attention by the reader to know which sort of deaf child is being discussed as sometimes results apply mostly to oral deaf children and not to those using sign language or vice versa. Overall, though, it is worth walking the path Edwards and Crocker have laid out.

Deaf children are complicated, confusing, and challenging as well. Edwards and Crocker help to place some order and organization on the complexity and remove some of the confusion. The challenges, though, still remain for all of us.

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