ABSTRACT

I distinguish and assess three separate arguments utilized by the opponents of cochlear implants: that treating deafness as a medical condition is inappropriate since it is not a disability; that so treating it sends a message to the Deaf that they are of lesser worth; and that the use of such implants would signal the end of Deaf culture. I give some qualified support to the first and second claim, but find that the principal weight of the argument must be borne by the third argument: that use of the cochlear implants is impermissible because Deaf culture is intrinsically valuable. I show that this claim is, in practice, incompatible with the claim that deafness is not a disability: that the significant disadvantages suffered by the hearing impaired can only be corrected by measures that would end Deaf culture. Since the potential recipients of cochlear implants are, in the main, the prelingually deaf children of hearing parents, the burden of banning the implants would be borne by people who are not members of Deaf culture, and who owe that culture nothing over and above what we all owe cultures in general. I conclude that we cannot ask the parents of these children to sacrifice the interests of their children for the sake of Deaf culture.

The invention of the cochlear implant was hailed as a great stride forward in medical technology, and a great boon to the deaf. Here was a device which would enable a significant proportion of the profoundly deaf to hear, many for the first time. This was an advance which ought to be welcomed by everyone, it seemed, but most of all by the deaf themselves. After all, they were to be the beneficiaries of this technology, which would alleviate their suffering by correcting their handicap.

It might come as a shock, then, to learn that many deaf activists and their supporters have rejected the implants, in the strongest
possible terms. Far from representing a significant aid to the deaf, opponents claim, the implants are nothing less than a form of cultural genocide. The accusation is to be taken literally: widespread use of the implants would spell the end of the distinctive Deaf\textsuperscript{1} culture, a culture at least as valuable as any other. The implant would signal the end of this culture because it would effectively prevent Deaf culture from reproducing itself. Since at least 90\% of those children who are either born deaf, or who lose their hearing in infancy, are born to hearing parents, Deaf culture cannot be transmitted in the usual way, within families. Instead, it must be passed on in residential schools, in which Sign is the first language and in which new generations are acculturated. But if the decision to implant is left in the hands of hearing parents, there will be no new generations in the schools, and the culture will die.

In what follows, I want to examine the arguments against the use of these implants that have been put forward by Deaf activists and their supporters. It is not difficult to identify a number of confusions in these arguments. Nevertheless, once these have been cleared away, there still remains a core of substantive moral considerations. The debate over the use of cochlear implants presents us with a genuine moral dilemma, in the sense that whatever course of action turns out to be, on balance, the best will carry with it a heavy cost: either the destruction of a culture or the sacrifice of the interests of potential implant recipients.

I

Before I begin to analyse the arguments that the opponents of the implants have put forward in support of their case, I want to pause to offer a reason why I think this debate is of wider interest, quite apart from the specific issues upon which it turns. Its wider significance comes from the fact that it bears directly on an area in which we have confused and contradictory intuitions. That area is the value of cultures. Some of our intuitions seem to support the idea that cultures are intrinsically valuable; valuable, that is, in themselves, and without regard to the goods they make available to their members. Thus it seems to me that we need to

\textsuperscript{1} Following a convention that is now widespread, I distinguish between deafness and Deafness. The deaf are all those people who have a significant degree of hearing loss; the referent of this term is therefore biological. The Deaf are all those people who belong to and identify with Deaf Culture and speak Sign as a first language.
explain opposition to assimilationist policies by way of the belief that cultural diversity is intrinsically good, and that we ought at least to have an initial (perhaps defeasible) assumption of the intrinsic value of each individual culture.

On the other hand, some of our intuitions seem to give support to the notion that cultures have only instrumental value; that is, that they are valuable only to the extent that they enable their members to satisfy their preferences, or to live lives which they find worthwhile, and so on. Thus the intuition that individual freedoms ought not be limited in the name of preserving the integrity of a culture is widespread. But, since we have confused and contradictory intuitions on the question of the value of cultures, we don’t know how to go about settling disputes in which there is a conflict between the preferences of individuals and the demands of cultures – disputes which seem increasingly common. A well-known example is the debate over the promotion of the French language in Quebec, a province that uses legislation to force some parents to educate their children in French, whatever their own preferences might be.2

Now, it may be that the debate over the use of cochlear implants can serve as a kind of test case, by thinking through which we can systematize our intuitions. The debate seems such a good candidate because it presents us with a case in which the instrumental and the intrinsic conceptions of the value of cultures are clearly separated. As we shall see, it is plausible to maintain that Deaf culture is valuable despite not making a range of desirable goods available to its members. We have here a clear case in which we face a choice: if we make these goods available to children by giving them the means of belonging to the hearing community, this will come at the expense, not of any individuals, but of the culture itself. If cultures are only instrumentally valuable – assuming that Deaf culture is a genuine culture – then there ought to be no ethical problem in allowing it to die, so long as its members are at least as well off in terms of the goods which cultures make available to their members as they would otherwise have been. If cultures are intrinsically valuable, however, then undermining the conditions for the continuing existence of Deaf culture might itself be impermissible, even though no individuals are worse off as a result.

II

I turn now to the arguments the proponents of Deaf culture have utilized in making their case against cochlear implants. Here is a representative comment, from Roslyn Rosen, then president of the National Association of the Deaf:

I’m happy with who I am [...] and I don’t want to be ‘fixed.’ Would an Italian-American rather be a WASP? In our society, everyone agrees that whites have an easier time than blacks. But do you think a black person would undergo operations to become white?3

This comparison, of the use of the implants to cure deafness to a treatment aimed at ‘curing’ blackness, is characteristic.4 What kinds of claims are Deaf activists and their supporters pressing by making this comparison?

There are, I think, three basic arguments implicit in this claim.5 These arguments are:

(1) That though it is true that the deaf are disadvantaged, deafness is not a disability (anymore than is blackness). Since it is not a disability, it is inappropriate to treat it by medical intervention. I shall call this the ‘disability argument’.


4 For other examples see M. Arana-Ward. As Technology Advances, a Bitter Debate Divides the Deaf. Washington Post May 11, 1997; and H. Lane and M. Grodin. Ethical Issues in Cochlear Implant Surgery: An Exploration into Disease, Disability, and the Best Interests of the Child. Kennedy Institute of Ethics Journal 1997; 7: 231–251. It ought to be noted, however, that in their October 6, 2000, position paper on cochlear implants, the National Association of the Deaf evinces a more nuanced attitude to the implants. While the NAD continues to worry that their use will perpetuate the view that the Deaf are, ipso facto, ill, it nevertheless now recognizes that the implants might be of significant benefit to some individuals.

5 I deliberately concentrate on this set of arguments and leave aside the objections that have been based on the supposed limitations of the implants. It may be the case that cochlear implants leave their recipients caught between two worlds, in neither of which they function well. But even if this is so, I think it is plausible to assume that these limitations will be overcome as the technology develops. For the purposes of this paper, I therefore make the assumption that the implants will give their recipients functionally normal hearing. For contrasting assessments of the effectiveness of the implants, see R.A. Crouch. Letting the deaf Be Deaf: Reconsidering the Use of Cochlear Implants in Prelingually Deaf Children. Hastings Center Report 1997; 27: 14–21; and B.P. Tucker. Deaf Culture, Cochlear Implants, and Elective Disability. Hastings Center Report 1998; 28: 6–14.
(2) That medical intervention to treat deafness is insulting or demeaning to the Deaf; it communicates to them that they are of lesser worth simply because they are Deaf (the ‘message argument’).

(3) That deafness, whether or not it is a disability, is the constitutive condition of access to a rich and living culture. Since cultures are intrinsically valuable, we may not engage in actions that would tend to undermine or destroy them (the ‘culture argument’).

I shall examine each of these arguments in turn.

\textit{The disability argument}

The claim that Deafness is not a disability is often run together with the claim that Deaf culture is valuable. The idea is that Deafness is not a disability due to the fact that it carries with it this crucial compensation of giving access to a culture. Since I am going to treat the argument that cochlear implants are impermissible because they would weaken or destroy an intrinsically valuable culture separately, I want to distinguish the culture and the disability claims. In any case, it seems to me the fact ± if it is a fact ± that the Deaf have an intrinsically valuable culture to compensate them for their condition is not incompatible with holding that nevertheless deafness \textit{is} a disability. If there is a reason to hold that deafness is not a disability, it must be independent of the culture argument.

In fact, Deaf activists do offer us an independent argument. The proponents of this position hold that though it is true that deafness carries with it a number of significant disadvantages, it is not a disability because the disadvantages associated with deafness are not natural, but social in origin. Since this is the case, the ethically appropriate way to respond to these disadvantages is by altering society, not the Deaf. This is part of the reason why recourse is so often had to the analogy between being Deaf and belonging to a minority race or ethnic group. It is undeniably the case that these group memberships carry with them significant disadvantages – discrimination, a lower than average level of education, reduced life expectancy, higher rates of unemployment, and so on. But these disadvantages are not a natural or inevitable consequence of being, say, black; instead, they are social in origin. Blacks suffer from these disadvantages, not as a result of being black, but as a result of being black in a society that discriminates against them.
Moreover, given the source of the disadvantages suffered by blacks, it is impermissible to suggest that their disadvantage be eradicated by changing facts about them. It is impermissible to end Australian Aboriginal disadvantage by pursuing a policy of assimilation; *a fortiori* it would be impermissible to end their disadvantage by ‘curing’ them of their blackness, if this were possible.

How plausible is the claim that deaf disadvantage, like that suffered by blacks, has social, and not natural, causes? Now, there is a sense in which all disadvantages are social in origin. We might say, for example, that people with one arm are disadvantaged socially because their comparative disadvantage would disappear if everyone else consented to have one hand tied behind their back. In order for the disability thesis to have any content, however, I take it we need more than this trivial sense of socially-caused disability, which results from confusing disability with comparative disadvantage. Instead, I will say that in order for a disability to qualify as socially-caused, it will need to satisfy two conditions:

1. it must be the case that social arrangements *could* be altered so as to remove the disadvantage and;
2. there must be no compelling reason why social arrangements could not be so altered.

If we examine the disadvantages experienced by those we call the disabled, we find that some of them meet these criteria; we can therefore say of them that they are socially caused. For example, we can say that wheelchair users are socially disabled by the widespread use of stairs (rather than ramps) in the design of buildings. The claim meets both conditions: (1) social arrangements could be altered so that stairs were not widely used in public buildings and (2) there is no compelling reason why stairs should be used.

On the other hand, we can say that wheelchair users are naturally disabled by their inability to participate in activities that other people value, from sports to hiking. I take it that the claim that this kind of disability is also social in origin would fail, because though it conceivably could meet condition (1) – we could end this source of disadvantage simply by no longer engaging in these activities – the claim fails by not meeting condition (2). We do possess a compelling reason to continue to engage in these activities (namely, that they are intrinsically valuable).

Let us apply these conditions to the disadvantages suffered by the deaf. What we find, I think, is a mixture of natural and social
disabilities. Historically, much deaf disadvantage has had a social origin. Most devastating of the socially-caused disabilities was that caused by the proscription of Sign by the Milan Congress of 1880, the effect of which was to deprive the deaf of their language, of any language.\textsuperscript{6} But the deaf are also, pace their most passionate activists, naturally disabled. They are, for example, disadvantaged by the fact that sound is widely relied upon as a means of alerting people to dangers, from car horns to sirens to fire alarms. This is, in my terms, a natural disadvantage because though it meets condition (1) – social arrangements could be altered so that lights instead of sound are used in such devices – it fails to meet condition (2). We have a compelling reason to continue to use sound rather than lights in such devices because hearing, unlike sight, is a sense that is not easily shut off, or focused in one particular direction. Hence sound has a greater capacity to attract the attention of those who are asleep, or simply looking the other way.

We ought, therefore, to conclude that in its strong form, the disability argument fails. Some significant disadvantages suffered by the deaf are natural, not social, in origin. Nevertheless, in a weakened form the argument has greater plausibility. We have already corrected for some of the disadvantages the deaf suffer, by proving sign-language interpreters and captioned television programs, for example. There can be no doubt that much more could be achieved in this direction. It might even be the case that the poor performance of the deaf on a wide range of social indicators – education, health, and so on – is explicable almost solely in terms of social obstacles to their full participation in public life.\textsuperscript{7} That this is the case is suggested by the history of Martha’s Vineyard, an island off the coast of Massachusetts, in which hereditary deafness was so common that the use of sign language became general. With the language barrier down, the deaf were integrated fully into the community’s life – indeed,

\textsuperscript{6} A brief history of deafness, and a convincing argument that depriving the deaf of Sign is effectively to prevent them developing normal mental capabilities, is contained in O. Sacks. 1991. Seeing Voices: A journey into the World of the Deaf. London. Picador. On the Milan Congress, see especially p. 27.

\textsuperscript{7} By any standard, the Deaf are a severely disadvantaged group: ‘The average deaf person today reads at a fourth-grade level. One in three drops out of high school. Only one in five who starts college gets a degree. Deaf adults make 30 percent less than the general population. Their unemployment rate is high, and when they are employed, it is usually in manual jobs such as kitchen workers, janitors, machine operators, tailors and carpenters, for which a strong command of English is not required’. Ward, op cit. note 4.
Vineyarders seemed not even to identify them as a distinct group. The result was that deaf Vineyarders performed as well as anyone on most of the indicators we mentioned. The exception was education, on which the deaf tended to outperform their hearing neighbours.8

One of the lessons of Martha’s Vineyard, then, is that overcoming the social barriers to participation in the life of a community can indeed achieve a great deal in compensating for the disadvantages suffered by the deaf. This does not show, however, that these disadvantages are social in origin: as we have seen, at least some of the disadvantages suffered by the deaf are natural. Since this is the case, there does not seem to be any reason in principle why deafness ought not to be a fit subject for medical intervention. Much will depend on the relative importance of the social and the natural origins of the disadvantages. We shall return to this question, and to the lessons to be learnt from Martha’s Vineyard, later.

The message argument

The claim made by those who advance this argument is that medical intervention to treat deafness sends a message to the Deaf; that they are of lesser worth simply because they are Deaf. This, I take it, is the claim central to this editorial from Deaf Life magazine:

Parents who choose to have their children implanted are in effect saying, ‘I don’t respect the Deaf community, and I certainly don’t want my child to be part of it. I want him/her to be part of the hearing world not the Deaf world.’9

The claim seems to be analogous to that advanced by Adrienne Asch, as a reason for opposing selective abortion of foetuses which are found to be carrying a genetic illness.10 Just as we condemn the selective abortion of female foetuses, Asch argues, because of the message the practice sends to actual living girls that their lives are of lesser worth, so we ought to condemn the abortion of foetuses which carry cystic fibrosis or Down’s

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9 Quoted in Dolnick, op. cit. note 3, p. 43.
syndrome because of the message these abortions send to people living with these disabilities. The editors of *Deaf Life* suggest a similar argument against the use of cochlear implants on infants. By ‘curing’ them of their disability, we send a message to the adult Deaf, who are too old to be candidates for the implants or simply refuse to have them, that their lives are of lesser worth. By treating the disability as an object for medical intervention, we send a message to the bearers of that disability. The message is that we want no more people of ‘your kind’ – no more disabled people, no more Deaf people, no more Down’s children. The clear implication of such treatment, Asch contends, is that such people are held to be of lesser worth simply because they suffer from a disability.

How convincing is this line of thought? At least some philosophers have found it wildly implausible. Laura Purdy, for example, argues that to hold that treating a disability is to attack its bearer is to identify the bearer with the disability, and that is simply a philosophical mistake. For Purdy, it is important to resist identifying disability with the disabled:

> My disability is not me, no matter how much it may affect my choices. With this point firmly in mind, it should be possible mentally to separate my existence from the existence of my disability. Thus I could rejoice, for instance, at the goal of eradicating nearsightedness, without taking that aim as an attempt to eradicate me, or people like me.¹¹

Purdy is, I think, on solid ground in arguing that it would be a mistake to identify the nearsighted with nearsightedness. But it seems at least equally plausible to maintain, as Roslyn Rosen does, that to treat blackness as a disability fit for medical intervention would be a demeaning insult to black people, and I suggest part of the explanation of this fact lies in the fact that blacks who regard their race as a constitutive element of their identity are not making a philosophical mistake. Race or ethnicity is the kind of thing around which identities are formed, and nearsightedness is not. What distinguishes these cases, and in which class does deafness belong?

I think the most important element differentiating the two cases, the element which makes one a constitutive element in the identities of a group of people, whereas the other cannot serve as such an element, lies in the fact that ethnicity is a condition of

access to a culture, whereas nearsightedness is not. We are essentially cultural beings, and our identities are always cultural identities. Being black is the sign that one is the inheritor of a rich culture. It is the visible symbol that one belongs to a particular community, a community that is as valuable as any other. To attempt to ‘treat’ or ‘cure’ such a symbol is indeed – symbolically, if not actually – to attack that culture and that community. It is an objectionable act. But being nearsighted is not the sign of belonging to a particular community, nor even a causal condition that would allow one to enter such a community. It is not, therefore, the symbol of belonging to anything. And it is thus appropriately treated as something detachable from the identities of the people who suffer from it, something that can be treated or cured without qualms.

But if the question whether or not the medicalization of a property of mine represents an attack upon my identity or a benign focusing on something extrinsic to who I am turns on whether or not that property is the condition of access, or the sign of belonging to, a distinctive culture, deciding into which class deafness falls will depend upon our assessment of the third argument against cochlear implants:

That deafness, whether or not it is a disability, is the constitutive condition of access to a rich and living culture. Since cultures are intrinsically valuable, we may not engage in actions that would tend to undermine or destroy them (the ‘culture argument’).

The remainder of this paper will therefore focus on this argument, the real heart of the question whether cochlear implants are benign treatments or an unacceptable example of eugenics.

The culture argument

How convincing is the claim that the widespread use of implants is cultural genocide? There are two prior questions, both empirical:

(I) Is there such a thing as Deaf culture? And
(II) Will the cochlear implants undermine or destroy this culture?

To give the first question the treatment it deserves, we would need an adequate definition of ‘culture’. We need such a definition to make the necessary distinctions between cultures and sub-cultures, for example, distinctions that might be crucial
in determining the value to be given to their preservation. I do not have space to develop such a definition here. Nevertheless, I think we can easily lay down some necessary conditions that the way of life of a group must meet in order to count as a culture. I take it that such an entity must be ongoing; it must inform the activity of its members over at least several generations. The members of a culture must hold values that differentiate them from the members of other cultures. These values must be expressed in some material form—in works of art, for example, or in rituals. Finally, the members of a culture must engage in activities—ranging from hunting to watching television—which are partly constitutive of that culture.

How well does Deaf culture measure against these criteria? Taking them in reverse order, it is apparent that the Deaf engage in activities that are distinctive. Most obviously, they speak a language that is confined almost solely to them. Moreover, the possession of a distinctive language is itself highly significant. Having one’s own language is, I suggest, neither a necessary nor a sufficient condition of having a distinct culture. Nevertheless, it is strongly correlated with having a culture, perhaps because languages tend to encode and transmit values.  

It is also the case that Deaf culture produces its own, distinctive, material expressions of its values. Sign itself is such an expression; to it we can add the distinctive art forms elaborated in it. Sign poetry, sign wit, sign theatre—there is no doubt that the Deaf have a thriving artistic culture.

Finally, is it the case that Deaf culture meets the test of providing the way of life, the values and their material expressions, for an ongoing group? On this score, Deaf culture is unique. Almost all cultures are passed on in the contexts of families—one learns one’s language, one’s values, one’s religion, and so on, from one’s parents. But 90% of children born deaf are born to hearing parents (conversely, 90% of the children of Deaf couples are hearing). If there are such things as Deaf values and a Deaf way of life, then this cannot be passed on from

12 In The Case for Linguistic Self-Defense (in The Morality of Nationalism. 1997. R. McKim and J. McMahan, eds. New York. Oxford University Press: 324–339) George Fletcher goes further, arguing that one culture is differentiated from another and gets its specific character from the language which is spoken within it. For him, this fact grounds an inherent right to linguistic self-defense. Fletcher would thus seem committed to holding that Deaf culture has such a right.

13 On these art forms, see Sacks, op. cit. note 5, pp. 147–9.

14 These figures are drawn from Lane and Grodin, op. cit. note 4, pp. 233–4.
parents to children in the usual way. Moreover, in the normal course of things (geographically and genetically isolated regions like Martha’s Vineyard aside), the deaf are too thinly scattered, too isolated from one another, to sustain an ongoing culture, even if they happen to be born of deaf parents. Thus Deaf culture is a unique phenomenon; a culture largely transmitted in and through the schools, especially the residential schools, in which the Deaf are concentrated and in which Sign is the dominant language.\textsuperscript{15}

That Deaf culture, if it exists, is virtually unique in its mode of transmission\textsuperscript{16} ought not to disqualify it from counting as a culture, but it does give rise to unique moral dilemmas. In the most common cases, the rights of parents to bring up their children as they see fit and the rights of cultures to perpetuate themselves are in harmony. Parents want to pass their culture on to their children, and when they belong to a minority culture, it is this process that ensures the reproduction of that culture. In this case, however, the rights of parents to bring up their children as they wish and the needs of the Deaf culture are in tension. Hearing parents will almost inevitably choose that their children belong to the hearing world, if they are offered such a choice. But if they were to do so, a full 90\% of the potential members of the Deaf community would never belong to it. It is plausible to maintain that such a loss of membership will spell the end of that community, and therefore of Deaf culture.

We have here another reason why the debate over the use of cochlear implants presents us with unique dilemmas. This is not the only case in which the wishes of parents and the needs of a culture conflict. Think, once again, of the Quebec language laws, which force immigrants parents to have their children educated in French. But the situation here is importantly different. In the Quebec case, there is no reason why the child ought not to be bilingual; no reason, that is, why she ought not to function well in the wider (French-speaking) society while also speaking her parents’ language as a first language. In the case of the deaf child, however, true bilingualism is rarely achieved. Usually, if the child speaks Sign as a first language, she has little competence in or comprehension of spoken languages. For most native speakers

\textsuperscript{15} Lane and Grodin. \textit{op. cit.} note 4, p. 234; Sacks, \textit{op. cit.} note 5, p. 138.

\textsuperscript{16} If there is such a thing as homosexual culture, presumably it too is transmitted through mechanisms that are not biological – through the acculturation of young gay people into an already existing gay way of life. This will be the case, whether or not there is such a thing as a ‘gay gene’.
of ASL (or Auslan, or any other of the many completely distinct varieties of Sign), English is a second language, a largely written second language.

We must be clear what exactly Deaf activists are advocating. Arguing that cochlear implants ought not to be used, that deaf children should be allowed to join the Deaf community instead, they are in fact arguing that the value of preserving Deaf culture ought to take precedence over the wishes of parents, including their reasonable and natural wish to share a first language with their children. Deaf children will belong to a different culture than their parents, and they will communicate with them in a language (either Sign or a spoken language) in which one or the other lacks native fluency.

I turn now to assessing the culture argument. Given the plausible assumption that (a) the widespread use of cochlear implants will spell the end of Deaf culture and (b) that the use of these implants is nevertheless in the interests of the children who receive them (since deafness is a disability, and since the Deaf do very badly on a broad range of social indicators) is the use of such implants permissible? Ought the interests of children (and the preferences of their parents) take precedence over those of the culture, or vice-versa? Or is there some middle ground we can find here?

I think it will be helpful to distinguish here between two arguments made by the advocates of Deaf culture. The first argument is sound enough. From the premises that Deaf culture is intrinsically valuable, and that the use of cochlear implants threatens its ongoing survival, this first argument infers the conclusion that we have a prima facie obligation to oppose the use of the implants. The argument is sound; whether we ought to act on its conclusion will depend upon the strength of the prima facie obligation and of competing obligations.

But Deaf activists also make a second claim, one which is rather less convincing. They claim not only that there is a prima facie reason to oppose the cochlear implants, but that this obligation falls disproportionately upon the (hearing) parents of deaf children. This is the conclusion for which Lane and Grodin argue, for instance.

They build their case in a manner with which we have become familiar, by comparing the situation of the deaf child to that of

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17 Though they argue against the use of implants, Lane and Grodin concede that nevertheless their use may well be in the best interests of each deaf child taken individually. Op. cit. note 4, p. 237.
the black child. But, as they see, the appropriate analogy is not to the usual case, in which the black child is raised by parents who share her race. In this uncontroversial kind of case, there is no tension between the wishes of the parents and the (putative) claims of a culture. Instead, Lane and Grodin compare deafness to the situation of the black child adopted by white parents. They argue that these parents have a responsibility to the culture ‘that the child’s constitution predisposes him to enter’. Given this fact, they claim, the adoptive parents forfeit the rights that biological parents normally have, to choose the culture into which their children will enter. The representatives of Black culture might have the moral right to a power of veto over some of their child-raising decisions. In exactly the same way, Lane and Grodin argue, the decision whether or not to equip an infant with an implant is not the parents’ alone; instead, it is a decision concerning which the representatives of Deaf culture ought have an important say.

Unfortunately, this argument seems to be fundamentally flawed. In particular, it suffers from a confused understanding of the concept of a culture. Lane and Grodin hold that the adoptive parents of a black child, like the hearing parents of a deaf baby, have special responsibilities and duties to the Black and Deaf cultures respectively. But this ignores the fundamental difference between skin colour and culture, between physical impairment and being Deaf – the very difference which Deaf culture activists signify by the distinction between being ‘deaf’ and being ‘Deaf’. To belong to a culture is not to have a certain skin colour, or to possess certain physical characteristics. It is, of course, true that almost all Blacks are black. But this is not because skin colour and culture are the same thing, but because in the normal course of things to be born black is to be born to parents who identify with and belong to Black culture. In this most common of cases, the acculturation – the process by which the dispositions, practices, rituals, beliefs, and so on, of a culture are learned – of black children is into Black culture. But this is not because they are born black; it is because they are born the children of their parents. The situation is somewhat different in the deaf case. Most of the profoundly hearing-impaired become Deaf not through acculturation into their parents’ culture, but through being educated in the residential schools which provide the culture with its generational continuity. In both cases, however, the culture is learned. Cultures are just not the kinds of things we are born belonging to.

18 Lane and Grodin, op. cit. note 4, p. 242.
If this claim does not seem intuitively obvious, perhaps a consideration of the alternative Lane and Grodin offer will show where the confusion lies. For them, hearing parents’ duty to Deaf culture is grounded in the fact that their deaf child would belong to that culture ‘absent any special intervention’. Just as black children have a Black heritage, whether they are raised by black parents or by white, so deaf children have a Deaf heritage. They therefore ought to be considered members of the Deaf culture, ‘right from the start’. But this cannot be so, neither in the case of black children, nor in the case of the deaf. To be potentially a member of a culture is not to be a member of that culture, not even if membership of that culture is usually or even invariably associated with the possession of a physical characteristic. A culture is not a race – which, if they exist, are things we belong to simply by virtue of our genetic makeup – but an entity which is defined by its mores, it values, its symbolic systems, and so on. One is not born into a culture, but socialized into it. Perhaps Lane and Grodin ought to have asked themselves which Black, or Deaf, culture the child belongs to, since there is a plurality of such cultures. Does the black child adopted by white parents belong to the US Black culture, or to one of the many African cultures? Does the child born deaf belong to US Deaf culture, or British, or Icelandic, or Chinese (all of which speak their own, unique, Sign languages)? To be born a potential member of a culture is not to be born a member of that culture. To think otherwise is, frankly, racist, for it is racist to attribute to people certain beliefs and practices simply on the basis of their race.

19 Ibid., p. 248.
20 Ibid., p. 241.
21 Here I agree with D.S. Davis. Cochlear Implants and the Claims of Culture? A Response to Lane and Grodin. *Kennedy Institute of Ethics Journal* 1997; 7: 254. However I dissent from her view that cultures are, to an important degree, chosen (253–4). Davis needs to think that we can choose our culture, in order to construct her argument that cochlear implants are desirable because they give the child ‘an open future’ (256); the hearing person may choose to participate in Deaf culture by learning ASL, for example, whereas a deaf person cannot simply choose to participate in the hearing world. In fact, though physical constitution is not culture, it may nevertheless effectively determine cultural membership (Crouch, *op. cit.* note 5, p. 15). If the child is fitted with an implant which gives her functional hearing, she is unlikely to have any reason to make the enormous commitment in time and effort which would be necessary to learn ASL well enough to be a spectator of Deaf culture, let alone to acquire the near-native ability in it, and also internalize the values of the culture, to the extent necessary to be a participant. It is not racist to point out that the parents’ decision, to implant or not to implant their deaf child, will effectively determine...
If this is the case, then we can endorse the first argument I distinguished – that the intrinsic value of Deaf culture gives us a *prima facie* reason to oppose the implants – while yet rejecting this second claim – that the hearing parents of children with congenital or acquired deafness are under a special obligation to Deaf culture. It is racist – or perhaps more accurately, biologist – to hold otherwise. It might be plausible to maintain, as communitarians do, that people who are members of a particular culture have special obligations to that culture; that we all have obligations to the culture that has made us the kinds of people we are. But the hearing parents of deaf children have no *special* obligations to a culture that has played no role in forming their identity, and to which their child only potentially belongs (after all, thanks to the availability of cochlear implants, their child *also* potentially belongs to the hearing world). If Deaf culture is intrinsically valuable, then protecting it and ensuring its survival is no more their obligation than it is that of any hearing person.

III

How does the balance sheet stand after our analysis of the arguments that have been used to oppose the use of cochlear implants? The results are mixed. We have seen:

(1) That it is not true that the deafness is not a disability, since it is not the case that all the disadvantages associated with it are social in origin. However, there is no doubt that a very significant portion of these disadvantages *are* social in origin.

(2) Whether or not it is appropriate to regard medical intervention to treat a physical characteristic as demeaning to those who possess this characteristic depends upon whether the characteristic is such that it could be constitutive of the identities of rational individuals. Deafness as a merely physical impairment is not the kind of thing around which healthy identities are formed – but Deafness as a culture is exactly the sort of thing with which people identify. Indeed, part of what we mean by saying that something constitutes a cultural membership; it is racist to say that if a hearing person acquires the culture of the Deaf, she nevertheless cannot be Deaf. This is precisely what Lane and Grodin maintain: ‘hearing children of DEAF adults, called “codas,” are not considered DEAF despite their fluency in ASL and acculturation to the DEAF-WORLD’ (p. 241). This is simply to confuse culture with race.

culture is that a group of people come to be the kinds of people they are as a consequence of belonging to it.

(3) Finally, we have seen that hearing parents of deaf children have no special obligations to Deaf culture; obligations, that is, over and above those possessed by other hearing adults. To think otherwise is to confuse biology with culture.

Since the balance sheet is mixed, there is moral weight on both sides of the question. I take it, then, that we here face a real moral dilemma, in this sense: however we ought, on balance, to act, we will be responsible, directly or indirectly, for the commission of an uncancelled moral wrong. If we believe that Deaf culture ought to be protected – for example, by banning the use of cochlear implants – then we condemn thousands of children to a lifetime disability; albeit one which carries with it the valuable compensation of membership in a rich culture. If we come to the opposite conclusion, that it is morally incumbent on us to cure deaf children of their disability, then we start down a path that will almost inevitably lead to the destruction of that culture.

How are we to make this decision? When we are faced with the necessity of choosing between two mutually exclusive alternatives, each of which carries with it moral costs and benefits, the only way to make the choice is to weigh those costs and benefits. In order to make our decision, then, we must decide what weight to accord to the preservation of Deaf culture, and what weight to the disability itself. How can we go about assigning these values?

In defence of Deaf culture, we might point out that it is not merely one more culture, but that it is unique – unique, not in the sense that all cultures are unique, but in a stronger sense. Since it is a culture formed around a shared language that exploits a different medium to all spoken languages, a medium in which there are syntactical possibilities unthinkable in linear languages, Deaf culture might be a uniquely visual culture. Oliver Sacks goes so far as to suggest that there may be a ‘neurological sense’ in which we can speak of a ‘deaf mind’:

> [T]he difference between the most diverse spoken languages is small compared to the difference between speech and Sign […]. And this […] may determine, or at least modify, the thought processes of those who sign, and give them a unique and untranslatable, hypervisual cognitive style.

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23 Sacks, op. cit. note 4, p. 107 n115.
24 Ibid., p. 74 n75.
Deaf culture may not just be intrinsically valuable, then, it might even be especially valuable.

Against the value of Deaf culture, however, we must weigh the harm done to children by allowing them to suffer from a disability that is treatable. How much weight are we to assign this disability? As we have seen, proponents of Deaf culture hold that it ought to be attributed little weight, because the most significant costs of being deaf are social in origin. Since they have this origin, they ought to be dealt with by changing (hearing) society, not by treating the deaf. And indeed, we have seen that it is plausible to maintain that the most significant costs associated with being deaf are the contingent result of the fact that the deaf speak a language with which almost no hearing people are familiar. The lesson of Martha’s Vineyard, you will recall, is that if this linguistic barrier falls, the social barriers it creates dissolve also. Though deafness remains a disability when everyone speaks Sign, nevertheless it is a disability of relatively little significance.

However Martha’s Vineyard has another valuable lesson to teach us, one that the proponents of Deaf culture seem to have missed. It is indeed the case that the experience there showed that the most significant costs of being deaf have a social origin. But Martha’s Vineyard also shows that the only practical way to avoid having to pay these costs comes at a significant price: the death of Deaf culture. The Martha’s Vineyard deaf were not significantly disadvantaged by their disability precisely because Sign was not confined to them. Since everyone spoke Sign, they were fully integrated into the community – which is to say that there was no separate Deaf culture. Indeed, neither the deaf, nor their hearing neighbours, seem even to have identified them as a distinct group.

Proponents of Deaf culture cannot have it both ways; they cannot simultaneously maintain that:

1. It is inappropriate to treat deafness as a disease; since its costs are social, and not natural, in origin, it is society, and not the deaf, which ought to be altered; and
2. Cochlear implants are to be opposed because their use would destroy Deaf culture.

These propositions are inconsistent. Though it is true that the most significant costs of deafness are, largely, social, the only practical way to reduce those costs is through the assimilation of the Deaf, whether through the generalization of Sign, or the use of implants. Either the Deaf must continue to bear the costs of their disability, or they must disappear.
We have seen proponents of Deaf culture insist on the analogy between Deafness and ethnicity. They have often taken this claim a step further, and asserted that the Deaf ‘political agenda [...] more closely resembles the agenda of other language minorities than it does the agenda of any group of people with a disability’.

But now we see a crucial disanalogy between the outcomes that the Deaf and ethnic groups can reasonably hope for. There is no reason, in principle, why a minority ethnic culture might not flourish and retain its distinctiveness, at the very same time as the barriers to the equal participation of its members fall away. The differences between the members of the minority culture and those of the dominant are rarely significant enough to prevent them from participating in the dominant culture, so long as that culture does not actively attempt to prevent them from so doing. This is not the case with the Deaf. So long as they are unable to hear, they will be significantly disadvantaged when it comes to learning a spoken language, and they can become full participants in the hearing world only if they acquire that ability, or if the rest of us learn to Sign. In either case, participation in the wider culture will come at the cost of the culture itself.

I think we are now in a better position to assess what moral weight to give to the burden of disadvantage carried by the deaf. We are attempting to weigh their disadvantage against the intrinsic value of Deaf culture itself. But we now see that the less weight we give to these disadvantages – on the grounds that they are social in origin – the less weight we are compelled to give to that culture. For we see that the cost of compensating for those disadvantages is the destruction of that culture. If we are to preserve Deaf culture, then the disadvantages suffered by the deaf will be significant.

With this result in hand, we are, I think, in a position to judge the moral permissibility of cochlear implants. Our moral dilemma has not disappeared, in the sense that the costs on both sides of the choice remain irreducible. But it is plain that whatever the value of Deaf culture might be, whatever internal restrictions on the Deaf themselves might be justified by the need to preserve that culture, Deaf activists and their supporters have no right to impose the burdens of deafness on hearing-impaired children. So long as Deaf culture survives, the costs associated with it will be relatively high, in that the deaf will remain an effectively isolated and underprivileged minority. Deaf children

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and their parents owe that culture nothing. Though Deaf culture might well be intrinsically valuable, I conclude – with regret – that the kinds of measures that would be required to maintain it are not permissible.

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