Beliefs About Deaf Education

BADE Scoring Manual
BELIEFS ABOUT DEAF EDUCATION QUESTIONNAIRE ITEMS – BADE

Subscales and their Items

To obtain Subscale Loadings: Add up all scores for the items in each subscale. Then divide by the total number of items (i.e., Factor 1: add numbers 17, 26, 3, 21, 10, 1, 15, 11, 14, and 8/ Divide by 10). Do the same for all four subscales. This provides subscale scores for individual participants.

To interpret your scores: Low scores mean that you disagree with this subscale (scores between 1 and 2.5); Scores of 2.5 to 3.5 mean that you neither disagree or agree with this subscale; Scores of 3.6 or above mean that you agree with the subscale.

Example:
If you score 4.1 on subscale 1, it would mean that you agree with the Literacy through Hearing Technologies and/or Visual Support for Speech Comprehension and believe in oral language for deaf children.

If you had a score of 2.3 on subscale 1, it would mean that you disagree with the Literacy through Hearing Technologies and/or Visual Support for Speech Comprehension and do not believe in only an oral language for deaf children.

If you had a score of 3.2 on subscale 1, it would mean that you truly do not agree or disagree with this subscale but may support parts of the subscale.

**Subscale 1: Literacy through Hearing Technologies and/or Visual Support for Speech Comprehension**

*1. Talking and signing at the same time provides children access to both a visual and an auditory language.
*3. Talking combined with Cued Speech (CS) and/or speechreading provides children visual and auditory access to language.
*8. New technologies (e.g., cochlear implants) are effective in producing normal-like hearing ability in deaf children.
*10. Cued Speech is an appropriate communication approach for young children.
*11. Families must focus on a child’s medical diagnosis and concentrate on therapeutic interventions during the first three years.
*14. Efforts initially should focus on medical interventions in order to try to reduce the negative effects of hearing loss.
*15. If children have early access to spoken language through residual hearing and/or vision (e.g., speechreading, Cued Speech) they will develop better language skills.
*17. Cued Speech, because it provides an accurate visual representation of oral language, can map the brain of young deaf and hard of hearing children, thus giving them an advantage for later developing literacy.
*21. Deaf and hard of hearing children can learn English if made accessible through a combination of residual hearing, speechreading and Cued Speech as infants.
*26. Deaf and hard of hearing children can become fluent in English (reading and writing) if given access to spoken language through hearing, speechreading, and/or Cued Speech in the first year of life.
Subscale 2: Visual Language and Bilingualism

*2. Young deaf and hard of hearing children can learn fingerspelling as infants.
*5. Being a member of a Deaf community with a unique culture and language enriches one’s life.
*7. Deaf and hard of hearing children can learn ASL.
*9. Language can be learned visually; therefore, American Sign Language (ASL) is an appropriate communication approach for young children.
*12. Deaf and hard of hearing children can become fluent in English (reading and writing) if given early access to language through ASL in the first year of life.
*16. If children have early access to sign, they will develop better later language skills.
*18. ASL, because it is a visual language, can map the brain of young deaf and hard of hearing children thus giving them an advantage for later developing literacy.
*19. Academic content can be best learned through ASL.
*23. A bilingual environment that includes ASL provides full access to language and communication.
*25. Deaf and hard of hearing children who do not have access to ASL when young struggle academically throughout their lives.

Subscale 3: Listening and Spoken Language

*4. Because sign language hinders the development of listening and talking, young deaf or hard of hearing children should be allowed to develop spoken language initially without the influence of signs.
*6. If children use hearing aids, they will learn language through their residual hearing regardless of the level of hearing loss.
*12. If children have early access to spoken language through hearing without visual supports then they will develop better later language skills.
*20. Using any visual supports while talking is confusing and hinders the development of auditory access to language.

Subscale 4: Difficulties Associated with Hearing Parents Learning ASL

*13. Hearing parents cannot learn ASL; therefore, the focus should be on the child’s oral language skills.
*22. Hearing parents cannot learn ASL; therefore, it is much more effective to help them learn English-based signs or Cued Speech.