Self-reports on silence as a face-saving strategy by people with hearing impairment

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The main assumption in this paper is that silence, defined here as avoidance or termination of talk in problematic and face-threatening situations, is used by hard-of-hearing people as a face-saving strategy in communication with hearing people. One hundred hearing-impaired people were asked to list any situations in which they refrain from conversation due to embarrassment. The situations which were mentioned by the subjects can be summarized as follows: (a) avoid talk in group situations, in public, noisy or open spaces; (b) avoid talk while concentrating; (c) avoid talk through impossible channels (e.g. telephone) or with other physical obstacles (inadequate positioning); (d) avoid talk when it is uninteresting or irrelevant; (e) avoid talk for socializing; with strangers and with people in a hurry. We argue that, given the wide range situations/reasons elicited in this study, avoidance of conversation in communication by hearing-impaired people cannot be uniformly viewed as a negative or maladaptive strategy of communication.

Introduction

For the purpose of this paper, silence is defined as avoidance or termination of talk. We are especially interested in strategic uses of this kind of silence in situations which can be perceived as problematic and/or face-threatening by hard-of-hearing people as a face-saving strategy in communication with hearing people.

One hundred consecutive patients attending the audiological rehabilitation clinics of the Welsh Hearing Institute of the University Hospital of Wales between January and April 1995 were asked to complete a brief questionnaire. It was worded as follows:

Many people with hearing difficulties will deliberately avoid conversation with other people in certain circumstances to avoid the embarrassment of having to ask them to repeat what they say.

Do you ever do this? YES NO

If YES *– please list the different circumstances in which you may do it. Write down as many as you can think of.*

This questionnaire was designed as a simple and open-ended instrument in order to elicit as wide a range of responses as possible. It must be stressed that we were not particularly interested in finding out whether hard-of-hearing people use conversation avoidance as a communicative strategy. That this is the case has been rather well-established in much audiological research on the communicative practices of hard-of-hearing people (see e.g. Caissie & Rockwell 1994, and below). Hard-of-hearing people are generally stigmatized, perceived as stupid, unfriendly, difficult and annoying (see e.g. Kyle 1987), which obviously renders communication between hearing-impaired and hearing people as 'problematic' talk (Coupland, Wiemann & Giles 1991). As the blame for the difficulties in communication rests with the hearing impaired, we felt justified in assuming that the notion of *face threat* (Brown & Levinson 1987) was the right focus for this study. Of course, for obvious reasons of avoiding technical jargon, we could not ask our respondents whether they "refrain from conversation with others in order to avoid face-threatening behaviour"; hence our phrasing of the main question, with which none of our respondents reported any problems of interpretation.

Avoidance of talk in problem situations is not confined to communication between hearing-impaired and hearing people. From the perspective of American communication studies, Hocker & Wilmot (1995) discuss avoidance as one several of possible 'styles' of communication in conflict situations. Apart from *avoidance*, they discuss the following styles: *collaboration*, *competition*, *compromise* and *accommodation*. Although Hocker & Wilmot's work takes a different perspective on communication from ours and does not involve 'disordered' communication, it is interesting to note that avoidance (like other styles mentioned by them) are discussed by the authors in terms of their advantages and disadvantages to interlocutors. Unlike much audiological research, in which avoidance of communication is discussed as a 'maladaptive' strategy (see below), Hocker & Wilmot observe that in avoiding (conflict), the avoider need not be ineffective. In fact, non-engagement may enhance the status of a high-power party in conflict with a low-power party. In interpersonal relations, "avoidance can keep one from harm, for example, when you are in a relationship in which anything other than avoidance will bring you a negative response" (Hocker & Wilmot 1995: 103). The latter comment is in fact reminiscent of the face-oriented approach to interpreting avoidance in this article.

The disadvantages of adopting avoidance in conflict situations include creating the impression of disengagement and lack of involvement. And pretending

that there is no conflict has a tendency to preserve it and reinforce it, which may result in a reinforced explosion or backlash at a later time (Hocker & Wilmot 1995).

Other researchers whose work is closer to the orientation adopted here than that of Hocker & Wilmot have also noted that different forms of avoidance are adopted and advantageous in problematic talk. For example, Bonikowska (1985) argues that 'opting out' from conversation is used strategically by interactants in face-threatening situations such as issuing complaints. Likewise, Tannen (1990) demonstrates how silence is employed for managing conflict and emotional tension between characters in literary fiction. Jaworski (1993) follows this idea and discusses several uses of silence whose function is to keep the channel of communication open in situations where talk is likely to lead to or signal termination of communication or contact. For example, serious (verbal) arguments between intimates may lead to a severing of their relationship, and avoidance of confrontation through silence may limit the potentially damaging effects of a quarrel. Likewise, extended silence is common in situations preceding the exchange of leave-taking formulae, which are the verbal markers signalling the termination of interaction. The longer or more painful the separation between two persons is perceived to be, the longer their silence is likely to take in order to 'delay' the moment of departure or loss. The extreme example of this type of silence has been observed between terminally ill patients and members of their families, when prolonged silence is used before the words marking the final parting (Lynch 1977).

The pragmatic study of communication between hearing and hearing-impaired persons has to concern itself with the area of 'problematic' talk (Coupland, Wiemann & Giles 1991). Loss of hearing has been documented as posing communicative and relational problems to audiological patients and their significant others. In a questionnaire-based study of the effects of hearing loss on the relationships between hearing-impaired people and their partners, Stephens, France & Lormore (1995) found that the most frequent problems listed by both sides are as follows: having to repeat what was said, playing the radio/TV loudly, frustration, having to talk loudly to the hearing-impaired person, and having to talk on behalf of the hard-of-hearing person (see also Stephens 1987; Hallberg 1995).

Naturally, if the effects of hearing loss are perceived as 'problems', those who are affected by them will develop coping mechanisms either to eliminate these problems or to ease their negative effects. Avoidance of conversation is one such strategy.

Some communicative strategies of deaf people's speech have been shown to be similar to those used by non-native speakers (NNSs) (see e.g. Keenan 1993 on deaf students' strategies in apologies). Likewise, avoidance of conversation is a strategy observed not only among the hearing-impaired. In their discussion of problematic talk in NS–NNS discourse, for example, Gass & Varonis (1991) note that non-communication and communication break-off are two types of non-engagement (avoidance of conversation) between NSs and NNSs. Non-com-

munication refers to avoidance of conversation, and communication break-off to the abrupt termination of conversation. Whilst communication break-off can be observed in various situations, the authors note that the other type of avoidance can usually only be illustrated anecdotally and give the following example:

> An American university student once told us that if she were walking down the street and saw her NNS conversation partner [an international student paired up with her for mutual language practice] when she was particulary tired, she would turn around and walk the other ways so as not to engage in what would undoubtedly be a difficult and stressful conversation. (Gass & Varonis 1991: 124)

As the above example illustrates, research on conversation avoidance must, to a great extent, rely on self-reported data. Otherwise, it may go unnoticed by the researcher.

The use of silence as a communicative strategy for managing problematic relations has been reported, for example, in intergenerational talk between all-female speakers (young home-helps and their elderly clients) (Atkinson 1993). In an attempt to avoid conflict, a home-help can maintain silence in response to a client's directions on how to clean the house, for example (consequently, the home-help proceeds with the cleaning in her own way, quietly, behind the client's back). On the other hand, clients often adopt silence in defiance of home-helps' use of baby talk, although this silence adds to their (clients') being marginalized and rendered invisible by home-helps.

Likewise, Hamilton (1994) quotes Lubinski's (1981) statement that avoidance of conversation is common behaviour for people with communication disorders. In her own work on communication with an Alzheimer's patient, Hamilton makes similar observations that a non-response to a mistaken or confusing utterance by a mentally disabled person is a common, mutually face-saving reaction of a non-disabled person. The work by Villaume, Brown & Darling (1994) indicates that old–old communicators with age-related hearing loss tend to adopt a restrictive conversational style, disregarding much of the inferential nature of talk. This style is also marked by one person dominating conversation at any one point while the other displays *passive*, supportive listenership. Finally, non-talk in general and as a realisation of a taboo subject (e.g. dying) is frequently observed among residents of nursing homes (Rowe 1992).

As the literature reviewed in this introduction suggests, silence (avoidance or termination of conversation) is indeed used extensively in different contexts of problematic, face-threatening or disordered communication. How, then, does this strategy function for the hearing-impaired?

The aim of the present study is to identify, through self-reported data, the areas in which avoidance of face-threatening talk is most likely to occur, which is why the strong presupposition about both the avoidance of talk and the face-threatening nature of talk among hearing-impaired people was present in the questionnaire.

This article is organized in the following way: a brief discussion of the place of silence in communication; an outline of the hearing-impaired vis-a-vis the

deaf and hearing communities; a critique of the notion of avoidance of talk as a 'maladaptive' strategy in communication between hard-of-hearing and hearing people; a discussion of the notion of face in interpersonal communication and silence as a face-saving strategy; and finally, a presentation and discussion of the results of the questionnaire.

Silence in communication

Silence in communication has received considerable attention in the past decade (see e.g. papers in Tannen & Saville-Troike 1985; Jaworski 1997), as it has been shown by many to go beyond the non-communicative absence of speech. In fact, silence has been described as a complex linguistic item whose functioning needs to be accounted for in terms of various pragmatic and sociolinguistic frameworks – for example, ethnography of communication (Basso 1972; Braithwaite 1990; Saville-Troike 1985), politeness theory (Sifianou 1995, 1997), relevance theory (Jaworski 1993), discourse analysis (Bilmes 1994; Watts 1997; Coupland & Coupland 1997), and narrative analysis (Hall, Sarangi & Slembrouck 1997), to name just a few possible approaches and studies from which silence emerges as a complex semiotic sign whose functioning cannot be relegated to a few simplistic rules represented across languages in a plethora of popular proverbs about speech and silence (Charteris-Black 1995). On the contrary, it appears as an important communicative resource whose understanding requires the sophistication of a fine-grained, interdisciplinary analysis.

One important and so far largely neglected aspect of the study of silence is the systematic investigation of *attitudes* towards silence and the self-reported usage of silence as a communicative strategy. A couple of exceptions which tackle attitudinal issues in relation to silence are the studies by Giles, Coupland & Wiemann (1992), and Jaworski & Sachdev (in press). The former study examines beliefs about silence cross-culturally and cross-generationally, while the latter examines secondary school students' beliefs about silence in the teaching/learning situation in the classroom.

As far as the cross-cultural differences are concerned, Giles, Coupland & Wiemann (1992) have found that, in line with earlier ethnographic research, Caucasian Americans appear to perceive talk as more important and enjoyable than Chinese Americans and native Chinese. Caucasian Americans believe that talk is more important as a means of social control than their Chinese respondents, who in turn view silence as more capable of being used to the same end. Likewise, the Chinese respondents showed a greater tolerance of silence than the Caucasian Americans.

The study also reports some interesting differences in the beliefs of British elderly and young people in relation to their own, their age peers', and the other group's communicative patterns. They concluded that the elderly seem to construe talk in more positive terms than the young, although the judgements about the speakers' own groups suggest that the young view themselves as more

attuned to the social norms governing verbal interaction, while the elderly view their own group as having more communicative problems. Members of each group hold a rather negative stereotype of the other group's talk. The young view the elderly as:

> valuing small talk greatly, with a strong tinge of egocentrism, and in an assertive manner that is not represented in the young's view of their own age peers ... The elderly's construals of the young's beliefs about talk suggest that they consider the young to be communicatively sceptical about the value of talk but none the less believe they do see some strategic value in 'chit-chat'. (Giles, Coupland & Wiemann 1992: 228)

Jaworski & Sachdev (in press) have examined secondary school students' self-reports on the use of silence in the classroom. Their results indicate that students perceive teachers as more talkative than themselves. This suggests that in the teaching–learning situation, silence is unmarked for students and marked for teachers (and that talk is marked for students and unmarked for teachers). This finding is in agreement with earlier discourse analytic studies which have found that teachers' talk dominates classroom interaction.

Another perspective on the use of silence in communication which is relevant to this study is offered by Sifianou (1995, 1997), who examines silence in terms of Brown & Levinson's (1987) theory of politeness. Sifianou observes that Brown & Levinson accord to silence the status of the most polite form of linguistic behaviour expressed in their super-strategy "Don't do the FTA". However, as Sifianou rightly points out, as far as utterances whose value is face-enhancing rather than face-threatening, silence does not retain its high politeness status. In fact, it may be quite rude (or face-threatening) to withdraw compliments and offers, for example, when they are expected by the addressee.

Apart from the ambivalent status of silence as potentially face-saving and face-threatening, Sifianou argues that silence can also be used as a positive, negative or off-record politeness strategy. For example, silence may reflect recognition and respect for the addressee to be left alone and undisturbed while working (negative politeness). Solidarity and rapport between people may be manifested through silent, attentive listenership, which allows the speaker to say all s/he wants and manifests the listener's involvement in the speaker's affairs (positive politeness). And finally, due to the inherent ambiguity and indirectness of silence, Tannen (1985) likens some of its uses (e.g. as a response to an embarrassing question) to off-record politeness.

Due to obvious space limitations, we cannot explore all the communicative facets of silence. However, even this brief overview of a few recent studies suggests that the interpretation of silence is greatly dependent on the context of its use.

The hearing-impaired and the deaf

The population affected by hearing loss is generally divided into two groups: the deaf community and the hearing-impaired. Language communication research follows the same division. For example, Swisher's study of the problems of acquiring spoken language by non-hearing students deals with the former group, which is defined in cultural terms as "those who identify themselves with the deaf community" (1989: 241). The assertion of this identity comes largely through the group's shared use of (American) Sign Language, as well as through the cultivation of other forms of symbolic identity, such as maintenance of distinctly deaf traditions, art forms and political activities:

> The [deaf] community, then, does not include all those who are deaf in audiological terms, but it includes deaf people who choose to use ASL and, by that token, to align themselves with the world of deaf people in a positive way. It is also, of course, a means of sharing experiences effortlessly, of achieving intimacy in communication without the struggle that using English and/or speech often entails. Many of the experiences that deaf people share on the negative side have to do with the difficulties of dealing with hearing people, with speech, and with English, whereas those of the positive side have to do with solidarity with other deaf people and the experience of living in a visual world, including the beauty and expressiveness of their language ... (Swisher 1989: 251-2)

Gregory (1992: 184) makes a similar distinction between hearing-impaired people and deaf people and is even more radical in her separation of the two groups than Swisher:

> Hearing impaired people, whilst they have a hearing loss, attempt to function as hearing people in that their language is the spoken language of their community and their social life is with other hearing people. Most people who become deaf later in life would fall into this category. They look to aids and equipment to ameliorate, as far as possible, the effects of their hearing loss and to give them access to the hearing world. Deaf people, on the other hand, are a group whose communication is through sign language, either because spoken language is inaccessible to them, or through positive choice.

Deaf people, then, are described as those who redefine their status and identity from a disabled group to a cultural and linguistic minority, whilst the impression given of hearing-impaired people is that, despite their disability, they adapt their communicative strategies to the speaking norms of the hearing majority.

The hearing-impaired and the hearing

The above distinction gives an unjustifiably simplified view of hearing-impaired people and their communicative needs, whereby the hearing population sets the 'norms' of successful communication to which the hearing-impaired are expect-

ed to conform. We believe that the hearing-impaired do not always choose to follow the communicative patterns typical of the hearing population. Despite the obvious disadvantages of their disability, which admittedly turns into a handicap more often than not (e.g. Hallberg & Carlsson 1993), Stephens has often found that his patients comment on the positive sides of their impairment. For example, in a study in which 125 patients were asked to list any *positive* experiences from their hearing loss, Kerr & Stephens (1997) found that 27 patients reported one or more positive experiences. In a group including these and 42 other respondents, 26 reported reduced disturbance by unwanted sounds (e.g. "not hearing the wife nagging"), 10 reported using deafness to self-advantage in social interaction (e.g. an excuse to avoid unpleasant situations), and 17 reported increased affinity with other hearing-impaired and disabled people.

In the light of such statements, it is quite clear that non-talk, or silence, can have a different, often positive value among hearing-impaired people than among the hearing members of the public, although, of course, the overwhelming majority of hearing-impaired people do report feelings of loneliness, lack of enjoyment of everyday life, and being threatened by silence (e.g. Orlans 1987).

Approaches to communication avoidance as a communicative strategy

Audiological research has demonstrated that hearing-impaired people use many communicative strategies to manage verbal interaction, e.g. lip-reading, asking for repetition, informing others about the hearing loss, feigning comprehension, avoiding others, withdrawing from communication, and preventing communication. The first three of these strategies are said to be 'adaptive', and the remaining ones have been termed 'maladaptive' (see Demorest & Erdman 1986, 1987; Hallberg, Eriksson-Mangold & Carlsson 1992; Hallberg & Carlsson 1991; Hétu, Lalonde & Getty 1987). Field & Haggard (1989) go as far as *not* to include communication avoidance as a possible category in their questionnaire assessing the knowledge of 'hearing tactics' (von der Lieth 1972, 1973) by people with hearing impairment. In another talk-centred approach to miscommunication, Tye-Murray, Witt & Schum (1995) adopt a normative interpretation of Grice's (1975) maxims of co-operation to discuss breakdowns in conversation with hearing-impaired people. For these authors, communication is successful only if the conversationalists follow Grice's maxims of *quality* (say the truth or what you believe is true), *quantity* (say as much as is required: not too much and not too little), *relevance* (be relevant), and *manner* (be clear). Of course, Grice did not intend his maxims in any prescriptive sense and argued that the deliberate flouting of the maxims is a necessary aspect of creating *implicatures* (see Thomas 1995 for a recent overview). In this paper, we address the question of the communicative strategies of hearing-impaired people in a non-normative way and redefine the 'maladaptive' strategies as affirmative ways of managing relationships between the hearing and hearing-impaired in face-threatening situations.

Avoidance of conversation as a communicative strategy

FEAR OF FACE LOSS

Goffman (1967) defines 'face' as the person's image which s/he claims for her/himself during contact with others. A person may come to *be in the wrong face* (when projecting a self-image which cannot be integrated by others) or *out of face* (when acting in a situation with which one is out of touch) (see Goffman 1967: 8), both of which are highly threatening to the individual, because other people's image of him/herself may suffer as a result. Therefore, a person is likely to *maintain* or *save* their face and is unlikely to *threaten* or *lose* it. Saving face allows for preserving self-respect and managing harmonious relations with others, and/or maintaining the well-being of others.

In their study of the use of communication strategies by adults with mild to moderate hearing loss, Wilson, Hickson & Worrall (1998) state that, in cases of communication breakdown, their subjects used a request for repetition as the most frequent strategy for managing conversation. This result is not surprising given that the authors collected their data in a laboratory setting while videotaping their subjects. This situation may have prompted the hard-of-hearing communicators to maintain their face by trying to follow as closely as possible what their conversational partners said. However, in a non-laboratory setting, hard-of-hearing people may be more likely to adopt other strategies.

Hearing loss is a negatively stereotyped predicament (see e.g. numerous chapters in Kyle 1987; Hétu 1996). The stigma, including self-stigma, associated with hearing loss and wearing a hearing aid is far greater than with visual impairment and wearing spectacles. As stigma leads to great distortions of self-identity and problems with group alignments (Goffman 1963), the potential risk of face loss for a person identified as hard-of-hearing is very high indeed. There is much evidence which suggests that the face-threat incurred by hard-of-hearing people due to their inability to understand what is going on in an interaction or because of their having to ask for a repetition of what was said stems from the projection of their image as helpless, incompetent individuals and an awareness by hard-of-hearing people of being negatively stereotyped as 'dumb' (see Jones 1987; Wood 1987; Hétu 1996).

FEAR OF POSING A FACE THREAT TO OTHERS

The maintenance of harmonious relations between people requires that one's actions (verbal or nonverbal) do not pose a threat to others. Requiring assistance to get by in conversation, making others repeat what they said or asking them to speak more loudly are serious threats to the face of the conversational partner of a hearing-impaired person. Hard-of-hearing people are clearly wary about forcing others to partake in uncomfortable situations. Some deafened people go so far as to not mention their disability to their close relatives and friends for fear of 'upsetting' them. For example, in her personal account of hearing loss, Woolley (1987: 171) comments on her inability to talk to anyone

about her deafness (admittedly in the 1960s) in what seemed like an attempt not to threaten her family members' face:

> After I was diagnosed deaf, I assumed that my father and I could talk about it and that he would be someone I could share my feelings with. But when I told him he said the news had broken his heart. I felt that I had broken my parents' hearts. There was no way I could show them how distressed I was about being deaf. I had to help them feel that there was no cause for worry. I was just the same happy daughter they had always had. So I talked to my parents about everything else except being deaf. Family and friends were also upset. My teachers at drama college were upset. *It was as if I had to help others with their distress rather than expect help with mine. After all it was my deafness that was causing the upset.* [our emphasis]

Thus, instead of enhancing her own positive face (and self-image), the author felt she had to avoid imposing on other people's emotions with what she perceived as only her own problem.

Methodology

A questionnaire, which comprised one open-ended question (see the introduction), was administered to 100 consecutive patients attending one of the audiological rehabilitation clinics of the Welsh Hearing Institute of the University Hospital of Wales over the period January-April 1995. Of the respondents, 46 indicated that they were males, 43 females and 11 did not indicate their gender. The mean age of the group was 72.4 years (s.d. 9.9 years).

We did not have detailed audiometric measures of the total population assessed, but previous studies on the same population sample have indicated a mean better ear hearing level (averaged across 500, 1000, 2000 and 4000 Hz) of 42 dB (s.d. 19 dB), indicating a moderate hearing loss, but with a wide scatter. None was congenitally deaf, and none of this population had a profound bilateral hearing loss. English was the first language of all respondents, all of whom lived within 30 km of Cardiff. About a quarter were previous hearing aid users, and the remainder were considered to be suitable candidates for hearing aid fitting.

It is difficult to determine reliably the length of time over which such individuals have experienced a hearing disability, but most previous studies on this population have indicated a median interval of six to ten years from first experiencing such a disability to seeking help for it.

In general, they were typical of the average population of predominantly elderly hearing-impaired people seeking a hearing aid in a society in which hearing aids are provided free of charge at the point of fitting.

Results and discussion

Of the 100 respondents, 55 stated that they did not use avoidance as a communicative strategy to avoid embarrassment; 45 ticked 'YES' and listed one or more circumstances in which they used avoidance as a strategy.

There was no significant difference by gender for responding 'YES' or 'NO' (see Table 1). In both groups, the mean age of females was greater than that of males, which can be attributed to the greater longevity of women found in most hearing rehabilitation departments (see Table 2). The difference between the mean ages of the males in the two groups was not significant, nor was that between the two groups of females.

Table 1. *Use of avoidance by gender*

	f	m	(unspecified)
NO	21	28	(6)
YES	22	18	(5)

x = 0.86; 1 df; n.s.

Table 2. *Mean age by response and gender*

	f	m	t	p
NO	77.3 (sd 7.8)	68.7 (sd 10.5)	2.41	0.022
YES	79.5 (sd 9.3)	64.2 (sd 14.7)	2.69	0.018

The fact that over half of the respondents answered the original question with a clear 'NO' is an intriguing one and calls for an explanation. If gender and age are not contributing factors to the divide between those subjects who replied to our question positively and negatively, other factors might be at play. Some hearing-impaired people may avoid conversation for other reasons than embarrassment at having to ask someone to repeat what they had said (as stated in the narrow formulation of the question): e.g. difficulty of communication, lack of interest in conversation, frustration and withdrawal, or any other personality- or context-related reasons. Of course, it might be the case that some of our respondents never avoid conversation due to embarrassment or for any other reason. However, this is an unlikely assumption, as conversation avoidance is cited as a prevalent communication strategy among hard-of-hearing people, and it is also a common strategy among hearing people. Of course, the dominant factors for conversation avoidance among hard-of-hearing and hearing people are likely to be different.

Caissie & Rockwell (1994) give three possible reasons for the occurrence of what they refer to as "unrepaired communication breakdown" among hard-of-hearing people:

1) lack of recognition that communication breakdown has occurred
2) lack of assertiveness to request clarification or repetition
3) lack of interest in verbal interaction: perception of the information as unimportant or uninteresting, which is reinforced by their difficulties in such situations.

Future work in this area should address these questions in greater detail, examining such factors as levels of assertiveness in an individual, degree of acquaintance with the conversational partner, topic of conversation, and so on. Of course, it is also possible that some hearing-impaired people will never resort to (or will never admit) conversation avoidance for any reason. In extreme cases, they may even try to control communication by holding the floor for as long as possible (Gilhome-Herbst 1995).

Regardless of the importance of interpersonal or situational differences in the use or non-use of the avoidance strategy in communication by hard-of-hearing people, our focus here is on the *use* of avoidance of talk by the hard-of-hearing, and the fact that 45% of our subjects do admit to resorting to this strategy due to embarrassment convinces us that linking this tactic to face concerns is the right approach to this and possibly other so-called 'maladaptive' communication strategies by the hearing-impaired.

Due to the open-ended nature of the questionnaire, the subjects listed the situations in which they avoid conversation in a very diverse manner. Some subjects offered only one type of general situation, e.g.:

- *I avoid conversation if I find it difficult to hear in some circumstances*
- *on occasions in a group situation.*

Others listed more specific contexts, e.g.:

- *telephone conversation*
- *very difficult in group conversation*
- *also with background noise*
- *noisy environments like pubs, factories, busy streets with traffic.*

Some respondents have basically restated the reason for avoidance of conversation mentioned in the original question, e.g.:

- *to avoid embarrassment of not understanding what others say or giving wrong answers to questions*
- *not to have to ask people to repeat what they said*
- *sometimes people walk away when asked to repeat what they said.*

A few other responses seemed not to be relevant. Two subjects mentioned avoidance of situations in which their immediate verbal response to ongoing communication was not required. One subject stated that they avoid going to the theatre because they can't hear the actors, and another gave the same reason for *not* watching television or listening to the radio (unless they played it very loudly).

However, the wide range of responses in our data fall into a few observable patterns. It is striking how these conform to the earlier findings in the audiological literature.

As many as 30 subjects stated that they avoid talk in group situations. This finding is consistent with other studies which mention 'group situations' as the most frequent and also the first context in which most hard-of-hearing people face problems with communication. Undoubtedly, one of the main reasons for the difficulty in verbal interaction (and consequently withdrawal from conversation) in those situations may be the level of background noise, which is often too high for a hard-of-hearing person to understand another person even if they repeat their utterance more loudly. Most patients who took part in this study had cochlear (inner ear) hearing losses, a characteristic of which is that they require a higher signal level in order to be able to recognise speech (or other signals) in a particular level of background noise, compared with normally hearing individuals. It is not surprising that the situations which are most difficult for hard-of-hearing people to communicate in are also those which they will perceive as most embarrassing for asking someone for repetition of what they said. After all, it is possible that the repeated utterance will also not be heard.

Likewise, talk seems to be frequently avoided in a variety of public places. Large and open spaces usually have very poor acoustics and with additional levels of noise make hearing difficult. Locales with background noise were explicitly mentioned by three subjects, and a similar factor (background noise) may account for the avoidance of conversation on public transport by four subjects.

Relatively many subjects stated that they avoid talk in situations which require concentration of thought or action– for example, while working or shopping. Five subjects listed specific channels of communication which, given the limitations of the hearing-impaired, make communication unfeasible to maintain: answering the telephone and the doorbell. Likewise, inadequate positioning of another person, e.g. speaking on the 'wrong' side or from behind, may trigger non-talk to prevent what is likely to be an unsuccessful attempt at verbal interaction.

Non-talk is also likely to prevail when the effort of acoustical processing of what is being said seems to the hearing-impaired to be great but its significance is predicted as low. In pragmatic terms, talk in situations like this may be described as low in relevance also for hearing people (Sperber & Wilson 1986).

Last, but not least, the respondents gave explicitly relationship-oriented purposes for avoidance of talk. In responses which raise this issue, our subjects seem to play down the importance of communication and conversation as the exchange of information (which seems to be the prevailing conceptualization of conversation in audiological research, e.g. Tye-Murray, Witt & Schum 1995) to

managing relationships with other people. In fact, several situations have been listed where talk, or attempts at talk, can be face-threatening to the hearing-impaired person or their potential interlocutor. Five subjects stated that they avoid talk *always* by refraining from any forms of socializing. Three subjects claim to avoid visitors at home. Two respondents stated that they would avoid talk with distant people or those who are in a hurry.

In sum, the responses can be grouped into following five broad classes:

a) avoid talk in group situations, in public, noisy or open spaces
b) avoid talk while concentrating
c) avoid talk through impossible channels or with other physical obstacles (inadequate positioning)
d) avoid talk when it is uninteresting or irrelevant
e) avoid talk for socializing; and with strangers and with people in a hurry.

The use of 'silence' by hearing-impaired people puts them in a severe double-bind. On the one hand, face-threatening communication can be avoided, but at the same time feelings of isolation and rejection can be profoundly exacerbated. Coming to terms with the latter outcome of hearing loss requires much effort, and has indeed attracted much concern in audiological research. It is our aim here, however, to concentrate on the possible beneficial aspects of talk avoidance for the hard-of-hearing.

The results of this study suggest that the recourse to silence by hard-of-hearing people cannot be regarded solely as a manifestation of communication breakdown between hearing and hearing-impaired people. At a 'deeper' level, this form of silence may represent a positive choice on the part of hearing-impaired people in managing their relationships with others (Coupland, Wiemann & Giles 1991). Avoidance of conversation by the hearing-impaired can be either self-oriented or other-oriented (or both, cf. Hamilton 1994). The former category includes concerns for one's own face due to the difficulties in processing utterances by others. The second category, which mirrors the first, involves the preservation of the face of others due to possible disruption and communication breakdown caused by the communicative difficulties of the hearing-impaired person.

According to Goffman (1967: 15), the basic way of preventing threats to face is to "avoid contacts in which these threats are likely to occur" (cf. Brown & Levinson's (1987) politeness superstrategy 5: "Don't do the face threatening act"). Thus, it is not difficult to understand why hearing-impaired people are likely to avoid verbal communication. As many as 45 subjects (out of the total of 100) claimed to avoid conversation with others due to embarrassment, or – in other words – to prevent threats to self and others.

Face concerns appear to be quite useful in explaining the relatively wide-ranging nature of the situations mentioned by the subjects in the questionnaire responses and account for any superficial contradictions or differences. For example, hearing-impaired people's desire to maintain face through non-talk

seems to be as strong in situations which involve relational talk (e.g. informal gatherings, meetings in pubs, parties) as in those in which talk is used instrumentally or for information exchange (e.g. while shopping, in question–answer periods after lectures, at work meetings, or in discussion groups). The vast majority of respondents in the 'YES' group stated that they avoid conversation in *group situations*. These were very specific, e.g. *at airport lounge*, or very general, e.g. *in company of other people*. The respondents also mentioned avoidance of talk with specific communicative partners: close and extended family, close and distant acquaintances, and strangers. The respondents mentioned avoiding talk with their *grandchildren, sister, wife, friends, visitors at home, people in public places*, and *anyone*. Two respondents mentioned *new acquaintances* as the most likely partners to trigger silence. There is practically no limit to the types of situations in which talk can be perceived as face-threatening to hearing-impaired people.

As has been said above, to put someone under the obligation of doing something they do not want to do (e.g. making them repeat their earlier utterance) is an imposition and a threat to their 'negative' face (Brown & Levinson 1987). An observation by one respondent in this study that hearing people walk away from the scene of conversation with a hearing-impaired person can be interpreted in two ways: (1) avoidance of talk is used to prevent a face threat to self when the speaker (self) is likely to be ignored, or (2) avoidance of talk is used to prevent a face threat to the other in order to free him/her from withdrawing involuntarily from communication. Such other-oriented face concerns were expressed by our respondents who claimed avoidance of talk to people in a hurry.

Another reason for other-oriented face-saving non-talk by the hearing-impaired respondents is to ensure the smooth flow of communication. By *not* taking an active part in conversation, hearing-impaired people do not impede its progression. To join a conversation would often mean slowing it down and disrupting its topic flow, e.g. *in discussions not knowing what is talked about* (sic).

Conclusion

This paper has suggested that for many hard-of-hearing people, silence (defined at the beginning of this paper as the avoidance of conversation in specific situations) can function as a means of managing relationships. Although silence is often associated by hard-of-hearing people with a state in which isolation, loneliness and frustration are unbearable, the avoidance of face loss connected with communication breakdown and stigmatization may override any desire to partake in verbal communication with others.

Our study raises an important question of boundaries between hearing impairment as a disability and the handicapping effects it has on those who are affected by it. A similar problem has been central in Pichora-Fuller, Johnson & Roodenburg's (1998) study of hard-of-hearing people's reasons and strategies for pretending that they understand their conversational partners. They argue

that when social goals in conversation override the importance of information exchange,

> too many requests for repetition [may] result in social rejection. Depending on the person and her goals in the particular situation, persisting in the use of repair strategies to achieve perfect comprehension might compromise the fluency of the conversation and result in greater social handicap than might result if less than perfect comprehension were tolerated. (p. 5)

The fact that we can identify strategies of communication like talk avoidance and pretending to understand in more positive terms than has been done to date has clear implications for clinical audiologists and counsellors to emphasize to their clients the interpersonal aspects of communication. It is vital for hard-of-hearing people to realize that communicative fluency, even at the expense of 'equal' participation in conversation, may increase their social acceptance and well-being.

Of course, the question of why 55 of our respondents did not admit to avoiding conversation due to embarrassment needs further consideration. Apart from some of the reasons stated earlier in our paper, we must also consider the possibility that many hearing-impaired people adopt a 'normative' approach to communication with hearing people and view silence as a sign of malfunction in communication (Scollon 1985). Many hard-of-hearing people, including some of our 55 'NO' respondents, will simply deny using silence in communicative situations. Of course, some may genuinely belong to the group of 'wont's' – people who never give up on communication and talk with others despite their impairment (Gilhome-Herbst 1995), although further empirical research is needed to address the question of the actual and perceived use of silence as a communicative strategy among the hearing-impaired (Jaworski, Stephens & Lewis, in preparation).

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