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Family and Practitioner Briefs

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How hearing children of deaf parents navigate deafness-related stigma

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Abstract

Hearing children of Deaf adults (Codas) navigate two distinct worlds: the sign language of home and the spoken language of society. Drawing on an extensive literature review and life histories, this Family and Practitioner Brief examines the indirect prejudice and structural barriers that Codas face across social spaces. It outlines five core experiential themes shaping Coda development, highlighting how these youth transform their bilingual and bicultural heritage into personal resilience and agency. Finally, it provides actionable recommendations for social workers, educators, and policymakers to shift from a medical deficit framework toward empowering, systemic family support.

Family and practitioner brief

Approximately 90% to 95% of children born to Deaf parents are hearing.[1] These children are often called Codas (Children of Deaf Adults). Since they grow up within a Deaf community while simultaneously participating in the wider hearing society, they typically use two languages (spoken and signed) and navigate two distinct cultures (Napier, 2021). Social services and family support programs usually group Codas with the general hearing public, wrongly assuming they do not need support and resources simply because they are not deaf themselves. Consequently, support systems focus only on Deaf parents or Deaf children, leaving hearing children in these families overlooked. This systemic oversight is made worse by unfair and unreasonable stereotypes, whereby societal views of Deaf signers are not commensurate with those of their hearing counterparts (O'Connell & Napier, 2026). This problem is made worse by unfair and unreasonable stereotypes whereby societal views of Deaf signers are not commensurate with hearing counterparts (O'Connell & Napier, 2026). These negative attitudes have a trickle-down effect on their hearing children. Past research has explained these struggles using a concept called "courtesy stigma"—a term created by sociologist Erving Goffman to describe a negative label that comes from having social ties with a stigmatized person (Goffman, 1963). Since societal perceptions of the competence of Deaf parents is often negative, Codas frequently face this same judgment by association. Without formal support mechanisms, Codas are left to navigate this unfair treatment independently. Furthermore, professional service providers often expect them to act as interpreters for their parents (Napier, 2021). This brief examines these critical gaps in support systems and reviews research regarding how Coda children respond to societal judgment.

The issue

International human rights frameworks, such as United Nations Sustainable Development Goal 10, protect every child's right to a life free from discrimination. Yet, institutional service frameworks routinely ignore the unique cultural and emotional needs of Codas. This isolation is compounded by courtesy stigma, wherein a child experiences social exclusion due to familial ties to a marginalized group. For Codas, this indirect stigma can trigger peer rejection and social friction, disrupting emotional development (Napier, 2021). Compounding this issue, many Deaf parents harbor a deep distrust of public institutions, fearing that hearing professionals will misinterpret parental deafness as a safeguarding risk (Napier et al., 2025; Oram et al., 2025). To avoid being unfairly labeled as unfit, families may isolate themselves, creating a service gap that leaves vulnerable children unsupported.

Why is this brief important?

To bridge this gap, this brief seeks to help practitioners recognize the hidden emotional toll placed on children who routinely translate complex or distressing medical and legal information. It guides social workers to move away from framing parental deafness as an automatic safeguarding liability, explains why families isolate themselves out of fear of institutional overreach, and offers clear strategies to build collaborative, intergenerational, trauma-informed services.

What we know

Research concerning Codas has shifted significantly over the past sixty years. From the 1960s to the 1980s, studies were typically framed

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using a medical model, reporting that growing up with Deaf parents caused language deficits and developmental delays while ignoring the critical social and cultural factors in their daily lives (Heffernan & Nixon, 2023; Palmer, 2025). In the 1990s, research shifted to challenge these stereotypes, confirming that Deaf adults are fully competent parents. Recent memoirs and qualitative studies emphasize that Codas are experts on their own upbringings (e.g., Sorenson, 2019). Deaf-parented homes foster high bicultural competence and fluent sign language skills, even though Codas must constantly balance life between a discriminatory society and their marginalized community.

Unpacking structural and courtesy stigma

To understand the Coda experience, professionals must examine the manifestation of structural stigma, where institutional rules, cultural habits, and funding deficits restrict support for marginalized groups. A prime example is the severe shortage of public funding for professional sign language interpreters in medical and legal settings. When institutions fail to provide interpreters, they pass the communication burden directly onto the family. This systemic gap forces hearing children to navigate complex adult environments, leaving both parents and children socially isolated. The structural barriers faced by Deaf parents inevitably trickle down, leaving children to help their parents navigate a discriminatory system.

What the qualitative literature shows: 5 core experiential themes

Global qualitative research indicates that indirect prejudice against Codas manifests across five core experiential themes.

Taking on adult roles and family interpreting

Systemic failures and a lack of interpreter funding means that professionals often turn to children to interpret for their Deaf parents. This dynamic can influence children in two ways. On one hand, studies report that Codas are sometimes thrust into adult situations for which they are unprepared. For example, if a hospital fails to secure a professional interpreter for a parent's medical appointment, the Coda child may be forced to interpret complex or distressing medical news. Consequently, many Codas report that their childhood was compromised by these premature responsibilities. On the other hand, research shows that Deaf parents frequently create open, supportive home environments free from these pressures. In these healthy spaces, Codas do not view interpreting as a burden. Instead, they see sign language and interpretation as a natural part of Deaf family life, a loving way to support their family. Rather than causing harm, this positive cultural experience helps children develop high levels of empathy, independence, and self-reliance.

Constant stereotyping and being mislabeled

Codas actively utilize their bilingual and bicultural skills to navigate and resist societal courtesy stigma. Due to prevailing negative assumptions about Deaf people, professionals—such as teachers, doctors, and social workers—frequently fail to recognize that language delay or language variation in a Coda is a natural part of bilingual development, where different languages are prioritized at different times. Codas have reported being subjected to unnecessary hearing tests and speech therapy despite being perfectly healthy. Overhearing such negative assessments from professionals can severely damage a child's confidence and educational experience. While some Codas draw immense strength from their unique cultural identity and dual language skills to resist this discrimination, other Codas may conceal the discrimination to protect their parents, which can lead to identity confusion and internalized feelings of isolation.

Language shaming and public rejection

Schools and public settings can unintentionally become highly stressful, vulnerable environments for Coda children. Since society frequently lacks Deaf cultural awareness, public use of sign language can draw unwanted attention, such as curious staring, insensitive remarks, or subtle exclusion from peers. If an educational institution fails to challenge this stigmatization, Coda children face language shaming and public rejection. Without protective frameworks or supportive resources, they are left to navigate this social discomfort entirely on their own. This systemic gap in support can deeply impact their emotional well-being and sense of belonging during crucial school years, often forcing them to internalize painful experiences to protect their parents from distress.

Keeping secrets to protect parents

To shield their Deaf parents from additional distress and guilt, some Codas actively mask their painful experiences. They conceal discriminatory comments overheard in public and hide instances of school bullying. Because healthcare and social services consistently fail to fund and provide professional sign language interpreters, these families are often cut off from crucial family support services. As a result, Codas carry a heavy emotional burden alone. Over time, keeping these secrets can compromise both their long-term emotional and physical health. This pressure leads some Codas to physically distance themselves from sign language and the Deaf community altogether. They may make this decision without realizing that the hardships of their upbringing were the result of societal neglect and institutional barriers, rather than a reflection of their parents' capabilities. While these concealment strategies shield parents from immediate harm, they can cause long-term identity confusion for the child.

Engaging in impression management

When schools fail to foster inclusive environments, Codas engage in "impression management" to survive socially. Goffman (1963) defines this as altering behavior, speech, and disclosure to control how others perceive them. Because many school systems fail to challenge ableist attitudes or educate peers about Deaf communities, Codas often fear peer judgment. To protect their families, they strategically hide their parents' Deaf identity (O'Connell & Napier, 2026). For instance, they may avoid inviting a friend home, invent excuses for missed school events, or complete official paperwork alone. While these strategies offer a temporary shield from a hostile environment, this institutional failure ultimately leaves Codas at risk of identity confusion and peer isolation.

Moving from research to action: what needs to change

Supporting Coda children requires systemic, multi-level structural reforms to transform how society, systems, and families interact.

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Government and policy level

Policymakers must formally recognize Codas as a distinct demographic group with specific cultural, linguistic, and emotional needs, correcting their current invisibility within state frameworks (such as those in the U.K. and Ireland). Statutory family services must explicitly align their operational mandates with international standards, including the UN Convention on the Rights of the Child and UN SDG 10, to guarantee targeted funding and protective equity. Governments must enforce and fund mandates for certified sign language interpreters across public sectors—particularly in healthcare, law, and education—to legally eliminate the reliance on child language brokering.

Family welfare and social work practice

Social work agencies must cease assuming that having Deaf parents places a child at risk or delays their development. Agencies should design counseling and support programs by listening directly to Coda youth. These services should help children cope with the shame of language discrimination, mixed feelings about their identity, and the heavy emotional weight of family translation. Finally, professionals must make it easier and safer for families to ask for help. The aim is to build trust and remove the fear that protective services will interfere in their lives.

Educational environments

Schools must create strong anti-bullying policies to protect children who use sign language from peer harassment or exclusion. Educators need to raise positive awareness about sign language and Deaf culture to ensure that peer attitudes and behaviors reflect respect for Coda identity. Schools have a responsibility to ensure that Codas are encouraged to freely express their parents' unique identity, language, and culture. To build an inclusive environment, schools must provide sign language courses for both students and staff. This transforms classrooms into safe spaces where Codas can feel proud of their bicultural roots rather than feeling forced to mask their experiences or the effects of courtesy stigma.

Family and community empowerment

Rather than placing the burden entirely on the family, institutional support systems, educational programs, and community networks must actively validate and foster Coda culture and identity. Gatekeepers of public infrastructure, education, and healthcare programs need to recognize that family stress is rooted in structural isolation and resource deficits, not parental inadequacy. They must adhere to legal mandates for professional interpreters, ensuring budgets prioritize accessibility rather than evading statutory duties at the expense of a child's well-being. Families should be encouraged to embed their households within local Deaf community hubs and dedicated Coda spaces, providing children with critical peer validation to confidently ground their bicultural identities.

Endnote

1. Following established conventions within the field of Deaf Studies, the term Deaf is capitalized to denote individuals who identify as members of the distinct linguistic and cultural minority community that uses sign language. Conversely, the lowercase deaf is reserved strictly for the audiological condition of hearing loss. Similarly, the abbreviated Coda is capitalized to align with modern Deaf Studies conventions that frame these individuals as a distinct cultural group.

Author contributions

Noel O'Connell (Conceptualization, Formal analysis, Funding acquisition, Investigation, Methodology, Writing—original draft, Writing—review & editing) and Jemina Napier (Writing—review & editing)

Conflicts of interest

None declared.

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