

Iva Rincic, Faculty of Medicine, University of Rijeka, Rijeka, Croatia*

Amir Muzur, Faculty of Medicine, University of Rijeka, Rijeka, Croatia**

Sandra Boskovic, Faculty of Health Studies, University of Rijeka, Rijeka, Croatia***

The role of Faculty of Medicine in Rijeka in developing and promoting deaf culture: a few old experiences and a promising recent initiative with deaf education

ABSTRACT

Starting from the tradition of research and rehabilitation of hearing and speech disorders in Croatia (SUVAG, Faculty of Education and Rehabilitation Sciences of the University of Zagreb), this article goes on to focus on recent initiatives aiming improving the education of deaf people at the Department of Social Sciences and Medical Humanities of the Faculty of Medicine of the University of Rijeka.

The first traces of interest in deaf people at the Faculty of Medicine date back to the academic year 2002/2003, when Ivan Segota (1938-2011) started an elective course entitled *How to Communicate with Deaf Patients*. A round-table discussion *Bioethical Aspects in Communication with Deaf Patients* was organized in 2006, and 2007 saw the start of a scientific project with the financial support of the Croatian Ministry of Science, Education and Sports. In 2010, the textbook *The Deaf and Medical Sign Language* was published.

¹ Part of this work was presented at the 9th Conference of the International Society for Clinical Bioethics (ISCB9): Global and Deep Bioethics and From New Medical Ethics to Integrative Bioethics, dedicated to the memory of Professor Segota (Rijeka, 24-26 September 2012).

* Contact address: Iva Rinčić, Ph.D., Assistant Professor, Department of Social Sciences and Medical Humanities, Faculty of Medicine, University of Rijeka, Rijeka, Croatia, B. Branchetta 20, 51000 Rijeka, Croatia, Phone: +385-51-688-245, Fax: +385-651-219, E-mail: iva.rincic@medri.uniri.hr

** Contact address: Amir Muzur, M.D., M.A., Ph.D., Full Professor and Head, Department of Social Sciences and Medical Humanities, Faculty of Medicine, University of Rijeka, Rijeka, Croatia, B. Branchetta 20, 51000 Rijeka, Croatia, Phone: +385-51-651-213, Fax: +385-651-219, E-mail: amir.muzur@medri.uniri.hr

*** Contact address: Sandra Bošković, MA, Lecturer, Department of Health Care, Faculty of Health Studies, University of Rijeka, Rijeka, Croatia, B. Branchetta 20, 51000 Rijeka, Croatia, E-mail: sandra.boskovic@medri.uniri.hr

At the same time, the authorities at the Rijeka Faculty of Medicine became aware of the long-term importance and necessity of transforming the faculty under the slogan “Faculty of Medicine of the University of Rijeka – Friend of the Deaf”. Collaboration has started with the American *Rochester Institute of Technology*, and the foundation of the *National Center for the Higher Education of the Deaf and Hearing Impaired of the Republic of Croatia* has been initiated.

Key words: deaf, education, Faculty of Medicine - Rijeka, Croatia

Introduction

When in July 2012 the Faculty of Medicine of the University of Rijeka received support in principle from the Croatian Ministry of Science, Education and Sports for the foundation of the *National Center for the Higher Education of the Deaf and Hearing Impaired of the Republic of Croatia*, this was not only a particularly important continuation of its activities aimed at the needs of the deaf and hearing impaired, but also marked the opening of a new page in its history. Since the pace and success of future activities in this field are hard to predict (preparing a study about the establishment of the Center will depend on the final decision of the Croatian Government) we will try to show below the chronology of events that preceded recent developments, and point out their underlying determinants.

The Croatian context and the tradition of interest and care for the deaf

The deaf and hard of hearing represent a significant portion of the overall population of the Republic of Croatia, which in 1998 had 4,784 deaf-mute, 7,176 deaf and 58,860 hard of hearing inhabitants (Kirincic, 2005). In most cases, deafness is the only disability in individuals in this population, and their communication through the classical means of writing and reading messages is greatly hampered by their modest vocabulary and agrammatism. This population is often the victim of prejudices that have persisted since ancient times.

Croatia has a particularly rich tradition of working for the integration of the deaf. The Croatian Association of the Deaf and Hard of Hearing was established in 1921 and today has approximately 9,000 members in 23 organizations. This association is a member of the World Federation of the Deaf (WFD) and the International and European Federation of Hard of Hearing People, and is also affiliated to the national Association of Organizations of Disabled Persons in Croatia (Croatian Association of the Deaf and Hard of Hearing, 2012). As early as 1955, the World Federation of the Deaf organized its second congress in Zagreb, which was attended by

approximately 2,000 deaf people and experts for the deaf from around the world. On that occasion, Dragoljub Vukotic (1924-1997) became president of the Federation and remained in that position until 1983.

In modern Croatia, the key document that provides the strategic framework for the education of the deaf at the national level is the National Strategy of Equal Opportunities for Persons with disabilities 2007-2015, which was published by the Government of the Republic of Croatia in 2007, especially Fields of Activities 2.2 Life in the Community and 2.3 Upbringing and Education (Government of the Republic of Croatia, 2007). The international framework has been mapped out primarily by Recommendation 1598 of the Council of Europe on the protection of sign languages of 2003, especially Article 10, which encourages member states to include sign languages as a valid academic qualification and to subsidize the publication of instructive literature in sign languages (Council of Europe, 2003), and, of course, by the UN Convention on the Rights of Persons with Disabilities of 2006, especially Article 24 on Education (UN, 2006). Unfortunately, to implement these recommendations, it is necessary to educate interpreters. In 2011, there were about 20 of them (Mrvos Pavic, 2011), and today, the Government recognizes 52 interpreters in Croatia. The Croatian Sign Language Act is currently (November 2014) under adoption procedure in Parliament

Even the most concise overview of institutional endeavors with regard to education of the deaf and about the deaf in Croatia must necessarily mention the Department of Hearing Impairments, which is part of the Faculty of Education and Rehabilitation Sciences of the University of Zagreb, and the SUVAG Polyclinic for Rehabilitation of Hearing and Speech. In Zagreb, Rijeka and Split, the “Slava Raškaj” centers exist, where sign language was used in deaf education (unlike SUVAG).

The Department of Hearing Impairments of the Faculty of Education and Rehabilitation Sciences emerged from the High School for Special Education (established in 1962) and is known for studying the grammar of the Croatian Sign Language and for linguistic research and teaching.

The SUVAG Polyclinic (*Systeme universel verbotonal d'audition Guberina*) was established in 1961 and is dedicated to studying the pathology of hearing and/or speech and to the verbotonal rehabilitation method. The founder of the Polyclinic was Petar Guberina (Sibenik, 1913 – Zagreb, 2005), Professor at the University of Zagreb, Head of the Department for Romance Studies, founder of the Institute (later Department) for Phonetics, and member of the Yugoslav and Croatian Academy of Sciences and Arts. In the mid-1950s, Guberina established a theory according to which it is possible to rehabilitate speech or hearing by stimulating remaining auditory capacities. Diagnostics include the precise determination of the location of the

impairment and the residual capacity, and rehabilitation is achieved through the stimulation of all spacioceptive systems: stereognosis, stereophonics, sensomotrics, etc. The method has developed special equipment (SUVAG, VERBOTON) and diagnostics (Polyclinic SUVAG, 2012), and is accepted in many centers worldwide (e.g. The Hearing & Speech Foundation, Maryville, TN, USA, 2012). According to its own statistics, 85% of children from the SUVAG Polyclinic continue education in regular schools, and 11% go on to high school or university (Dulcic, 2012).

The contribution of the Rijeka's Faculty Department of Social Sciences to deaf culture and education

Today, we do not know exactly when the event occurred which was the immediate motive for the Rijeka Faculty of Medicine to start educating future physicians and nurses for communication with deaf patients. However, the case is mentioned by Ivan Segota in his book: "...there was a deaf patient in Rijeka whom, even after several days in hospital, none of the nurses or physicians even tried to approach. His son, who was also my student, told me about this in the bioethics exam, and said that his father was frightened and anxious because he was being examined and subjected to blood tests and various therapies without knowing what illness he had, what his chances of recovery were, and how long he had to stay in hospital" (Segota, 2010a). At that time, Segota was mostly concerned with bioethical issues, so in this conversation he recognized elements of informed consent in the specific relationship of health workers towards patients with hearing impairment. After contacting Damir Herega, a TV sign language interpreter and professional staff member and secretary of the Deaf and Hard of Hearing Association of the County of Primorje-Gorski kotar, in 2000/2001 Segota started an "informal and optional course of sign language for all interested students of the Rijeka Faculty of Medicine, organized by the CROMSIC" Međunarodna udruga studenata medicine Hrvatske) (Segota, 2010a). In the following period, he elaborated the idea about the ability and skill of communicating in sign language for physicians as the "only correct solution" to achieve privacy in communication with patients in a (bio)ethical sense (Segota, 2010a). His vision about the need to introduce systematic education of students for communication with deaf patients was crucial for future educational and scientific efforts in this field. It has also served as a link between Segota's initial enthusiasm and later activities (cf. Rincic & Muzur, 2011; Rincic, 2009).

According to some, the beginnings of education for communication with deaf patients at Rijeka Faculty of Medicine date back to the academic year 2003/2004. However, since the first course materials were only published in 2003 (Segota &

Sorta-Bilajac, 2007), and a lecture at a scientific conference on the subject of educational experiences was held in 2004 (Sorta-Bilajac et al., 2004), it is rather unlikely that Segota introduced the course as a regular class just two years after the initial course in 2001. This doubt is supported by two quotes from Segota's works. The first is in the initial sentence of his Introduction (Segota, 2010a). Later in the same text, he recalls how at the beginning of his activities related to the deaf he had invited his "...colleague Herega to help restructure the elective communication course *How to communicate?* into a communication-bioethical course: *How to communicate with deaf patients?* ... The new course started in the academic year 2002/2003, and some of its important elements were included in individual subjects as part of regular and elective classes on bioethics." In the same year, the course materials *How to communicate (with the deaf)* (Segota, 2010a) were published. However, since Ivan Segota's associates were mainly involved in this educational process, we should not completely dismiss the claim that the beginnings date back to the academic year 2003/2004.

If we recall that Segota saw the bioethical doctrine of informed consent as the central issue in the relationship with deaf patients, it is an interesting coincidence that precisely in this period (2004), Aleksandra Frkovic, who at the time was closely related to the Department, prepared and defended her doctoral thesis entitled *Informed consent in the theory and practice of clinical bioethics*, mentored by Professor Segota (Frkovic, 2004; Frkovic, 2006).

The fact that Segota found inspiration for his educational and later also his scientific work in the fields of communication and informed consent with the deaf, can only partly be explained by his professional-scientific bioethical sensibility. It was much more the result of his personal experience and empathy. Segota wrote about this on several occasions, the most impressive being in the Introduction to his book about the deaf, when he recalled his experience as a journalist in the Zagreb editorial office of the *Vjesnik* newspaper and his collaboration with deaf typesetters, which obviously left a strong impression on him, especially with regard to the liberation from "...that feeling of discomfort that I mentioned, and to a certain extent from prejudices about the inferiority of the deaf." (Segota, 2010b).

The beginnings of scientific work

A positive response to the education of students for communication with deaf patients at the Department of Social Sciences and Medical Humanities of the Rijeka Faculty of Medicine came very quickly. The initial three-year experience had witnessed a great interest from the students in learning sign language, and there had

been a constant increase in numbers (Segota & Sorta-Bilajac, 2007). This showed that the *Deaf Project*, apart from education, required more scientific and research activities (without them it would be difficult to further develop educational courses). The year 2006 will be remembered for two important events: the Rijeka Days of Bioethics in May included the 7th Bioethical Round Table (BOSR₇) entitled *Bioethical aspects of communication with deaf patients*, and in November and December 2006 there was the Postgraduate Medical Education Course: *Education of health workers for communication with deaf patients*. The Round Table resulted in the publication of its proceedings (a total of 12 works by 19 authors) (Gjuran-Coha, 2007). In the foreword by the editor, Segota pointed out the role of the publication, and expressed his belief that it would fulfill its intended purpose “to, on the one hand, document bioethical activities in my Department, and on the other hand, to serve the bioethical education of our students and the wider environment of the Department of Social Sciences and its growing number of associates” (Segota, 2007). The postgraduate course for health workers was implemented with the institutional support of the County of Primorje-Gorski kotar, and was mainly taught by the Department’s employees and associates.

The Clinical Bioethics: Education for Communication with Deaf Patients project

Starting with a contract from 2 January 2007, Ivan Segota became head of the *Clinical Bioethics: Education for Communication with Deaf Patients* project at the Faculty of Medicine of the University in Rijeka, financed by Croatian Ministry of Science, Education and Sports. Apart from Ivan Segota, at the time of the project application, the collaborators on the project were Iva Sorta Bilajac, Morana Brkljacic and Gordana Pelcic. As stated in the application, within the recognized and scientifically verified processes of bioethical education in Croatia, the need had been identified to introduce the basics of communication with deaf patients into the “Rijeka model of bioethical education”, while the final aim was to move closer to European trends by introducing sign language into Croatian healthcare, educating physicians and nurses, and improving the Rijeka model of bioethical education with new elements, methods and models from clinical bioethics regarding communication with the deaf (MZOS, 2012).

As expected, in the following months, activities related to the project were intensified, and educational activities continued. 2007 saw the publication of the Proceedings of the Rijeka Days of Bioethics, which had taken place a year earlier and which had been dedicated to the issue of the deaf. The proceedings included

papers or summaries of lectures by all the collaborators on the project (Jancic et al., 2007; Pelcic, 2007; Segota, 2007; Segota & Sorta-Bilajac, 2007). In June 2007, at the 6th Losinj Days of Bioethics, Brkljacic gave a lecture entitled *Bioethical aspects of communication in healthcare* (Brkljacic, 2007), and collaborators on the project contributed two papers at the 9th World Congress of Bioethics in 2008 (Sorta Bilajac et al., 2008; Herega & Segota, 2008). In November of the same year, Sorta-Bilajac and Brkljacic participated at the “Equal Opportunities for the Deaf in the Light of the UN Convention – Recognition of Croatian Sign Language” Round Table, organized by the Croatian Association of the Deaf and Hard of Hearing in Zagreb.

After retiring in 2008, but having the status of Professor Emeritus, Segota continued to be in charge of several elective courses on various study programs (Medicine; Dental Medicine; Organization, Planning and Management in Healthcare) and one compulsory course which, as part of Nursing Studies, included education for communication with deaf patients (Bioethics in Healthcare). The most important part of the courses was dedicated to practical education (mastering sign language), and was taught by an associate of the Department, Damir Herega.

The book *The Deaf and Medical Sign Language*

2010 saw the publication of the book *The Deaf and Medical Sign Language: How to Communicate with Deaf Patients* by Ivan Segota and associates (Vesna Sendula Jengic, Damir Herega, Anja Petaros and Jevgenij Conar), published by the *Medicinska naklada* publishing company from Zagreb (*Sveucilisni udzbenici* - University textbooks). The book's reviewers were Amir Muzur, Iva Sorta Bilajac and Marina Milkovic. The book consists of 7 chapters: I. Foreword (Segota, 2010a), II. Introduction (Segota, 2010b), III. Bioethics and the Deaf (Segota, 2010c; Segota, 2010d; Sendula-Jengic, 2010a; Segota, 2010e; Segota, 2010f; Segota, 2010g), IV. Communication in the Doctor's Surgery (Sendula-Jengic, 2010b; Segota, 2010h; Sendula-Jengic, 2010c), V. Sign Glossary of Medical Terms (Herega et al., 2010), VI. Literature and VII. Index. However, this list of chapters does not reveal the true value of this book: the first 53 pages include original work dealing with various topics related to deaf issues, and the second part includes a collection of medical terms in Croatian sign language. Considering the fact that most of these terms did not exist until then (at least not as a widely accepted standard), this book enriched Croatian sign language, making it one of Europe's most advanced sign languages. As stated by Segota in the Foreword, “similar [medicinal] terminology in other sign languages barely exists. An exception is Spanish sign language, in which about ten years ago a manual of medical terms was published. This manual served as a model

to my associate Damir Herega, the author of the ‘sign’ part of the book. However, he and his student co-workers (Sandra Fabijanic, Katica Krizic, Danica Marjanovic, Lana Tisma, Ljiljana Lakic, Anja Petaros, Jegenij Conar and Ines Gazibara) still had to invest a lot of effort to come up with signs for individual diseases and medical terms in Croatian sign language” (Segota, 2010a). As a textbook published in a university edition, it was from the beginning included in the list of literature for students attending the course for communication with deaf patients. A particularly useful part of the work is a DVD showing 238 medical terms in video format..

A thorough insight into the extent to which this book has become a standard for Croatian sign language would definitely require an analysis of its acceptance or otherwise outside Rijeka in education for communication with the deaf. This book substantially focuses on general topics of so-called *Deaf Studies*. Its true value lies in its practical aspect: the glossary of medical sign terminology, which has undoubtedly improved communication between health workers and deaf patients, which is very important in the overall healing process. However, it does not cover all aspects of communication and the doctor-patient relationship. A relationship created in such a way is not without problems, and puts patients in an unequal position: their participation in communication depends on the physician’s readiness to communicate in sign language. In other words, the problem of the relationship between the health worker and deaf patient is much deeper and involves much more than just communication in sign language.

The deaf as a part of an institutional strategy: the *Faculty of Medicine of the University of Rijeka – Friend of the Deaf* project

Segota’s retirement in 2008 did not halt management of the project, but it did slow down its previous development, which was reflected in a relatively poor evaluation of the project by the Ministry in 2010. The sudden death of Ivan Segota at the end of 2011 opened a vacancy for head of the project. Since only several months remained until its end, upon the proposal of the Dean of the Faculty of Medicine, on 26 March 2012 the Ministry appointed Iva Rincic as the new head of the project. The Ministry has continued to finance the project until the end of 2014.

At the same time as these events, the Rijeka Faculty of Medicine started activities that have to a large extent continued Segota’s tradition of education for communication with deaf patients, but with a completely different institutional background. The beginnings of this initiative date back to April 2011, when Alan Sustic, Dean of the Rijeka Faculty of Medicine, visited the American Rochester Institute of Technology (RIT). Impressed with their scientific research, but also the

educational conditions and capacities, especially in the field of education of the deaf at the National Technical Institute for the Deaf (NTID), Sustic recognized the strategic opportunities of the institution that he was leading, tasking the Department of Social Sciences and Medical Humanities with “drawing up a plan and coordinating steps to prepare the Rijeka Faculty of Medicine for the education of deaf students, making it the first and therefore a potentially recognizable university of this kind in the region” (Muzur & Rincic, 2012). The combination of existing tradition, favorable partner relations, but also the social circumstances that required institutions to specialize in a narrow specialist field, marked the beginning of a new chapter regarding the deaf in Rijeka medicine.

In April 2012, a delegation from the Rijeka Faculty of Medicine (Daniela Malnar, Vice Dean for Professional Studies, Amir Muzur, Head of the Department of Social Sciences and Medical Humanities, Iva Rincic, Head of the Education for Communication with Deaf Patients project, Sandra Boskovic, a special needs teacher with experience in dealing with people with disabilities, and Damir Herega, associate of the Faculty of Medicine and court interpreter for sign language) visited Rochester and obtained the contacts, guidelines and professional material necessary to implement the new institutional strategy. The expert part of the visit included meetings with members of the board, employees and students of RIT (Will Clymer, Gerald Buckle, William W. Destler, Todd Pagano, Wes Blue, Karyssa Martin, Linda Bryant, Richard Smith, Linda Siple, Rose Marie Toscano, Marianne Gustafson, John Macko, Peter Lalley, Matthew Starr, etc.). That this is the right time for continued efforts has been confirmed on more than one occasion: support in principle from the Croatian Government for the foundation of the *National Center for Higher Education of the Deaf and Hard of Hearing*. Iva Rincic was invited to participate at the 15th European Health Forum Gastein in Bad Gastein (Austria) in October 2012, to present the idea of improving the education of the deaf at the Rijeka Faculty of Medicine, and to attract potential new partners from Europe.

In May 2012, Rijeka Faculty of Medicine hosted the 14th Days of Bioethics. This international scientific conference, the central event of which was entitled *The Language of Medicine – From its Genesis to the Culture and Ethics of Communication*, focused on the promotion of linguistic issues in medicine (medical terminology, foreign language education in medicine studies, medical discourse, communication, etc.) However, one part focused on sign language and deaf patients (Tina Bošković: *Sign Language in America*, Marina Milkovic and Anamaria Miksic: *Sign Language and the Culture of Deaf: Insights from Neurolinguistics*, Ljubica Pribanic and Marina Milkovic: *Cultural and Linguistic Barriers in Healthcare – Observations of Deaf*

Patients, and Anna Horňáková and Anna Hudokova: *Effective Communication with Deaf Patients*.

An attempt to systematize the ideas and the project

The idea that caught the attention of Ivan Segota almost by accident – communication with deaf patients as a necessarily bio-ethical relationship (which was clear from the first communication-bioethical courses) became a project with much wider importance. Some of the initial activities (the first courses, elective and compulsory courses, workshops aimed at educating health workers to communicate with the deaf) have remained active until today and are still an important part of the educational process.

Having gathered a wide educational experience, Segota and his associates certainly did not deny their ambition to take the subject of their interest to a higher, scientific level. The *Clinical Bioethics: Education for Communication with Deaf Patients* project, which was started in 2007, certainly gave a new impulse to the overall idea, and of all the results.

In recent developments, the Rijeka Faculty of Medicine has again turned to education, but no longer exclusively to education for communication with deaf patients (which starts out from a position of unequal communication partners), but to strategic institutional education for the deaf at the Faculty of Medicine in order to create the conditions for them to enter the academic world and acquire new knowledge and skills, open up new employment opportunities, provide better information, and finally to break down the numerous, more or less hidden, barriers.

In the end – a new beginning

The Rijeka Faculty of Medicine aims to reshape the basics of the existing elective course *How to Communicate with the Deaf*, pedagogically and methodologically, into a compulsory course *Communication with the Deaf/Hard of Hearing*, and introduce it to all study programs at the Faculty of Medicine; to collaborate with organizations/associations of the deaf and hard of hearing in order to include more of their members in university and professional studies at the Faculty of Medicine; to create a methodology of *educating educators* by engaging medical workers who have already completed a course in sign language or have achieved relevant skills in communication with the deaf/hard of hearing; to start a pilot project for a curriculum for the deaf/hard of hearing in professional studies (Medical Laboratory

Diagnostics, Midwifery, Physiotherapy, Radiologic Technology and Nursing); to present and popularize the *Faculty of Medicine – Friend of the Deaf* project at regional and international levels and ensure recognition and interest for the project at a regional level; to motivate general practitioners to acquire knowledge and skills in communicating with the deaf/hard of hearing; to use the results and experiences acquired by general practitioners to popularize the mastering of communication skills with deaf/hard of hearing people with medical specialists; to enrich Croatian sign language and publish teaching literature; to organize workshops for physicians, occupational medicine specialists and, at the beginning, interested medical specialists and hospital administration staff with the aim of acquiring knowledge and skills in communication with the deaf/hard of hearing; to design courses and encourage scientific interest in topics related to the neurolinguistics, sociology, anthropology and culture of the deaf etc.; to encourage students on study programs that require a diploma thesis to choose a subject relevant to the quality of life of the deaf/hard of hearing and offer them appropriate subjects for doctoral theses; to hold lectures and organize discussions to sensitize the public about the Deaf culture and sign language, and to choose relevant subjects to break down prejudices about the deaf and hard of hearing, etc. The Faculty of Medicine is also considering installing a so-called inductive loop system, which enables people with hearing aids to hear the speaker clearly by receiving the sound signal through a specially induced magnetic field instead of through air particles. Technical support for this Rijeka project has also been offered by CARNet, which is ready to organize training on creating online courses, preparing and processing teaching audio/video materials, videoconferencing, etc. (Rincic & Muzur, 2012).

To find a balance between preserving tradition, the current situation and expectations for the future has always been rather difficult. Being used to constant changes in social systems and values, we have often witnessed situations where people first destroy the old and then start from scratch, and so we forget that this lack of continuity (with all its positive and negative aspects) takes away precious time, resources, energy and results.

When it comes to the deaf, the Faculty of Medicine of the University of Rijeka is not starting from scratch, for it has a good basis in the activities of Ivan Segota and his associates in education for communication with deaf patients. Education of the deaf at the Faculty of Medicine is a new challenge, which is worthy of our effort, work and commitment. A new beginning is upon us: from the academic year 2012/2013, the first hard of hearing student is studying at the Rijeka Faculty of Medicine.

REFERENCES:

1. Brkljacic, M. (2007). Bioetički aspekti komuniciranja u zdravstvu [Bioethical aspects of communication in healthcare]. In H. Juric (Ed.), *6. losinjski dani bioetike: knjiga sazetaka* [6th Losinj Days of Bioethics: Abstract book] (pp. 41-42). Zagreb: Hrvatsko filozofsko društvo.
2. Dulcic, A. (2012). Slusanje uključuje pet osjeta [Hearing involves five senses]. *Zagreb – moj grad*, 6, 110-113.
3. Frkovic, A. (2004). Informirani pristanak u teoriji i praksi kliničke bioetike [Informed Consent in Theory and Practice of Clinical Bioethics]. Ph.D. Thesis. University of Rijeka – Faculty of Medicine, 2004.
4. Frkovic, A. (2006). Bioetički aspekti komuniciranja s gluhim roditeljima [Bioethical aspects of communication with deaf patients]. *Gynaecologia et Perinatologia*, 5, 187-191.
5. Gjuran Coha, A. (2007). Engleski znakovni jezik [English sign language]. In A. Gjuran–Coha (Ed.), *Bioetički aspekti komuniciranja s gluhim pacijentima* [Bioethical aspects of communication with deaf patients] (pp. 55-63). Rijeka: Medicinski fakultet Sveucilista u Rijeci – Katedra za društvene znanosti.
6. Herega, D. & Segota, I. (2008). Sign language in Croatian healthcare system. In I. Sorta-Bilajac, I. Blazevic & A. Tancabel (Eds.), *The 9th World Congress of Bioethics : The Challenge of Cross-Cultural Bioethics in the 21st Century – Book of Abstracts* (pp. 327-328). Rijeka: The International Association of Bioethics, University of Rijeka – Faculty of Medicine, Croatian Society for Clinical Bioethics.
7. Herega, D., Petaros, A., Conar, J. et al. (2010). Znakovni rječnik medicinskog nazivlja [Vocabulary of medical sign language]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 51-141). Zagreb: Medicinska naklada.
8. Ministarstvo znanosti, obrazovanja i sporta Republike Hrvatske (MZOS). <http://public.mzos.hr/Default.aspx?sec=2130>. Accessed Septemer 3, 2012.
9. Hrvatski savez gluhih i nagluhih. http://www.hsgn.hr/hr/pisanaIzdanja/43/43_6+7.pdf. Accessed August 29, 2012.
10. Ministarstvo znanosti, obrazovanja i sporta Republike Hrvatske (MZOS). <http://zprojekti.mzos.hr/page.aspx?pid=96&clid=1>. Accessed: August 24, 2012.
11. Jancic, E., Brkljacic, M., Prebilib, I. & Bauer, V. (2007). Informirano suglasje u pacijenata s nemogućnošću razumijevanja govora i nemogućnošću govora [Informed consent in patients with the impossibility of speech perception and the impossibility of speech]. In A. Gjuran-Coha (Ed.), *Bioetički aspekti komuniciranja s gluhim pacijentom* [Bioethical aspects of communication with deaf patient] (pp. 115-116). Rijeka: Medicinski fakultet Sveucilista u Rijeci – Katedra za društvene znanosti.
12. Kirincic, N. (2005). Gluhoca. *Medicina*, 42, 91-94.
13. Mrvos Pavic, B. (2011). Gluhi u Hrvatskoj komuniciraju ilegalno. *Novi list*, December 19, 2011.
14. Muzur, A., Rincic, I. (2012). Prijatelji gluhih. *Susacka revija*, 20, 75-79.
15. National Technical Institute for the Deaf, NTID. <http://www.rit.edu/overview/ntid>. Accessed: September 5, 2012.
16. Vlada Republike Hrvatske. (2007). Nacionalna strategija izjednačavanja mogućnosti za osobe s invaliditetom od 2007. do 2015 [National strategy of equalizing possibilities for persons with invalidity, 2007-2015]. Zagreb: Vlada Republike Hrvatske/Povjerenstvo Vlade Republike Hrvatske za osobe s invaliditetom/Ministarstvo obitelji, branitelja i međugeneracijske solidarnosti.
17. Pelcic, G. (2007). Gluhi pacijent i zdravstvo [Deaf patient and the healthcare system]. In A. Gjuran-Coha (Ed.), *Bioetički aspekti komuniciranja s gluhim pacijentom* [Bioethical aspects of communication with deaf patient] (pp. 115-116). Rijeka: Medicinski fakultet Sveucilista u Rijeci – Katedra za društvene znanosti.
18. Poliklinika SUVAG. (2012). <http://www.suvag.hr>. Accessed: September 4, 2012.
19. Rincic, I. (2009). Ivan Segota: skica za selektivnu biografiju i bibliografiju [Ivan segota: a sketch for a selective biography and bibliography]. In A. Covic, N. Gosic & L. Tomasevic (Eds.), *Od nove medicinske etike do integrativne bioetike – posvećeno Ivanu Segoti povodom 70. rođendana* [From new medical ethics to integrative bioethics: Festschrift to Ivan Segota's 70th birthday] (pp. 365-379). Zagreb: Pergamena, Hrvatsko bioetičko društvo.

20. Rincic, I. & Muzur, A. (2011). Variety of bioethics in Croatia: a historical sketch and a critical touch. *Synthesis Philosophica*, 26, 403-428.
21. Sorta-Bilajac, I., Segota, I., Brkljacic, M. & Herega, D. (2004). Bioetička edukacija za komuniciranje s gluhim pacijentima (europski trendovi i prva riječka iskustva) [Bioethical education in communication with deaf patients (European trends and first Rijeka experiences)]. In H. Juric (Ed.), *3. losinjski dani bioetike: knjiga sazetaka* [3rd Losinj Days of Bioethics: abstract book] (p. 94). Zagreb: Hrvatsko filozofsko društvo.
22. Sorta-Bilajac, I., Brkljacic, M., Rincic Lerga, I., Pelcic, G., Gjuran-Coha, A., Herega, D. & Segota, I. (2008). Bioethics education for communication with deaf patients: first Croatian experiences. In I. Sorta-Bilajac, I. Blazevic & A. Tancabel (Eds.), *The 9th World Congress of Bioethics : The Challenge of Cross-Cultural Bioethics in the 21st Century: Book of Abstracts*. (pp. 258-259). Rijeka: International Association of Bioethics, University of Rijeka – Faculty of Medicine, Croatian Society for Clinical Bioethics.
23. Segota, I. (2007). Rijec urednika [Editor's preface]. In A. Gjuran-Coha (Ed.), *Bioetički aspekti komuniciranja s gluhim pacijentima* [Bioethical aspects of communication with deaf patient] (p. 5). Rijeka: Medicinski fakultet Sveucilista u Rijeci – Katedra za društvene znanosti.
24. Segota, I. i Sorta-Bilajac, I. (2007). Klinička bioetika i gluhi pacijent . In A. Gjuran-Coha (Ed.), *Bioetički aspekti komuniciranja s gluhim pacijentima* [Bioethical aspects of communication with deaf patients] (pp. 9-13). Rijeka: Medicinski fakultet Sveucilista u Rijeci – Katedra za društvene znanosti.
25. Segota, I. (2010a). Pregovor [Preface]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 7-91). Zagreb: Medicinska naklada.
26. Segota, I. (2010b). Uvod [Introduction]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 11-13). Zagreb: Medicinska naklada.
27. Segota, I. (2010c). Sto je bioetika? [What is bioethics]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 15-18). Zagreb: Medicinska naklada.
28. Segota, I. (2010d). Klinička bioetika i gluhi pacijenti [Clinical bioethics and deaf patients]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 19-21). Zagreb: Medicinska naklada.
29. Segota, I. (2010e). Gluhi danas: s malim i velikim "G" [The deaf today: with small and capital "G"]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 26-27). Zagreb: Medicinska naklada.
30. Segota, I. (2010f). Skandinavski iskorak [The Scandinavian step forward]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 28-29). Zagreb: Medicinska naklada.
31. Segota, I. (2010g). Pokret gluhih i kultura gluhih [The movement of the deaf and the culture of the deaf]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 30-36). Zagreb: Medicinska naklada.
32. Segota, I. (2010h). Vizualni oblici komuniciranja [Visual modes of communication]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 46-48). Zagreb: Medicinska naklada.
33. Segota, I. et al. (2010). *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients]. Zagreb: Medicinska naklada.
34. Sendula-Jengic, V. (2010a). Gluhoća i gluhi kroz povijest [Deafness and the deaf in history]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 22-25). Zagreb: Medicinska naklada.

35. Sendula-Jengić, V. (2010b). Zdravstveni radnik i gluha osoba [Healthcare professional and a deaf person]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 37-45). Zagreb: Medicinska naklada.
36. Sendula-Jengić, V. (2010c). Čujuć i tišina [The hearing and the silence]. In I. Segota et al., *Glubi i medicinsko znakovno nazivlje: kako komunicirati s gluhim pacijentima* [The deaf and medical sign language: how to communicate with deaf patients] (pp. 49-50). Zagreb: Medicinska naklada.
37. The Hearing & Speech Foundation, Maryville, TN, USA. <http://www.hsfweb.org/services-and-programs/training-program/verbotonal-method>. Accessed: September 3, 2012.
38. Ujedinjeni narodi – Opća skupština. (2006). *Konvencija o pravima osoba s invaliditetom: fakultativni protokol uz Konvenciju* [Convention on the rights of the persons with invalidity; facultative protocol to the Convention]. Zagreb: Povjerenstvo Vlade Republike Hrvatske za osobe s invaliditetom/Ministarstvo obitelji, branitelja i međugeneracijske solidarnosti.
39. Vijeće Europe. (2003). <http://assembly.coe.int/documents/adoptedtext/ta03/errec1598.htm>. Accessed September 5, 2012.

Iva Rinčić, Amir Muzur, Sandra Bošković

Uloga Medicinskog fakulteta u Rijeci u razvijanju i promociji kulture gluhih: stara iskustva i obećavajuća nova inicijativa obrazovanja gluhih

SAŽETAK

Polazeći od tradicije istraživanja i rehabilitacije sluha i poremećaja govora u Hrvatskoj (SUVAG, Edukacijsko-rehabilitacijski fakultet Sveučilišta u Zagrebu) članak obrađuje recentne aktivnosti Katedre za društvene i humanističke znanosti u medicini Medicinskog fakulteta Sveučilišta u Rijeci usmjerene unapređenju edukacije gluhih osoba. Prve su naznake interesa za gluhe osobe na Medicinskom fakultetu prisutne od akademske godine 2002./2003., kada je Ivan Šegota (1938. - 2011.) uveo izborni kolegij *Kako komunicirati s gluhim pacijentima*. Okrugli stol *Bioetički aspekti komuniciranja s gluhim pacijentima* organiziran je 2006., a 2007. započeo je znanstveni projekt koji je financiralo hrvatsko Ministarstvo znanosti, obrazovanja i sporta. Knjiga *“Gluhi i znakovno medicinsko nazivlje”* objavljena je 2010. U isto vrijeme uprava Medicinskog fakulteta u Rijeci uočila je dugoročnu važnost i neophodnost transformacije fakulteta te započela projekt pod nazivom *“Medicinski fakultet Sveučilišta u Rijeci - prijatelj gluhih”*. Započela je suradnja s američkom visokom školom Rochester Institute of Technology te osnivanje Nacionalnog centra za visoko obrazovanje gluhih i naglušnih osoba Republike Hrvatske.

Cljučne riječi: gluhi, edukacija, Medicinski fakultet - Rijeka, Hrvatska