MENTAL HEALTH ISSUES

AMONG DEAF AND HARD OF HEARING

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MY MENTAL HEALTH TRAINING BACKGROUND

- Teacher at Walden School (program for emotionally disturbed Deaf and hard of hearing children) (6 years)
- MSW from Boston University
- Internship at Perkins School for the Blind (1 year)
- Internship at Freedom Trail Clinic (1 year)
- Clinical Therapist with Freedom Trail Clinic (2 years)
- Coordinator of Student Life Team at NTID (6 Years)
- Academic advisor and Personal counselor at NTID (3 Years)

MENTAL HEALTH AND DEAF PEOPLE

- Depression
- Panic attacks/anxiety
- Bipolar
- Schizophrenia
- Posttraumatic Stress Disorder (PTSD)
- Dissociative Identity Disorder (Multi-personalities disorder)
- ADHD/ADD
- Learning Disability
- Sleep disorders
- Co-dependency
- Survivor of abuses (Physical, Mental, and sex)
- Psychotic Disorders
- Anti-social personality
- Oppositional Defiant Disorder
- Alcoholism
- Drug abuse
- And the list goes on....

IS THERE ANY DIFFERENCES BETWEEN HEARING AND DEAF MENTAL HEALTH?

Similarities

- Biology/chemical causes
- Treatment plans (biology and mental)
- Alcoholism and Drug abuses
- Early interventions are critical
- Affects interpersonal relationships (especially in families)
- Goals of recovery or to adjust/accept the mental illness

Differences

- Language
- Resources are different or limited for deaf patients
- Third parties (Interpreters, etc)
- Causes can be not clear
- Evaluation and diagnosis are more likely to be wrong
- Assessments often are not designed for deaf population

EXPLORATION OF THE ASSESSMENTS AND DIAGNOSIS PROCESSES

- Are the tests (IQ, personality, learning ability, etc) well designed for the deaf patients?
- Is the evaluator able to sign fluently and can he or she understand the patient?
- If the sign language interpreter is being used during the evaluation process, is the interpreter well trained in mental health?
- Has the evaluator taken any courses in Deaf culture?
- Does the client understand the questions from the tests or during the interview?
- If the therapist is using literature review or research to draw upon when doing the assessments of the deaf patients, is the research biased against the deaf? Who did the research projects?
- Is the evaluator open to his or her hearing privileges, will he or she explore the oppression concerns coming from his or her relationship with the deaf patient?
- Will the therapist consider resources outside of his or her scope to receive support or consultations regarding "deaf issues"?
- Will the evaluator listen to his or her deaf patient well without any judgments or conclusions based on medical view?
- Can the therapist accept that some Deaf people do view deafness to be positive?

WHY IS THIS IMPORTANT?

- Wrong interpretations of tests or answers from interview would lead to wrong treatment plan and/or wrong intervention
- The client might receive wrong resources and/or wrong referrals
- The wrong mental health diagnosis would stay with the individual for a long time and can lead to several obstacles in his or her life that were not necessary
- The therapist becomes frustrated
- The client does not feel he or she is being treated or helped
- Could lead to possible lawsuits from client
- Can be sued for malpractice
- Unethical is not acceptable at any cost
- The client can be "harmed"

MENTAL HEALTH SCENARIOS

 Group interactive activities with the exploration of possible mental health scenarios

WHAT IS "HEARING PRIVILEGES"?

- Based on the white privilege concept
- General discussion
- Brief interactive activity on that topic

GENERAL DISCUSSIONS OF PSYCHOLOGICAL ISSUES WITH DEAF POPULATION

- Family issues
- Hearing and Deaf relationship
- Hearing/Deaf supervisor with hearing/deaf supervisee
- Language
- Oppression and Empowerment
- Career advising/counseling
- Second Disability (blindness, Learning disability, etc)
- Hearing cultures VS Deaf cultures
- Terminology: Hearing Impaired
- Culture VS disabled
- Advocacy
- Legal issues (Human rights, ownership of cars/homes, living will, marriage, divorce, custody issues with children, etc)

SUGGESTED GUIDELINES FOR SUCCESSFUL MENTAL HEALTH SERVICES FOR THE DEAF

- The therapist is fluent in sign language and is well versed with deaf culture
- If not, then the therapist is to seek a qualified sign language interpreter who is trained in mental health field
- Make sure that the psychology tests match the writing and reading levels of the client/patient
- Seek consultations from Mental health professionals who is familiar with deaf issues.
- Be open to hearing privileges
- Explore the concepts of oppression and empowerments
- Listen to deaf patient WELL
- Question the research materials and their research methods to see that they are not biased against the deaf or are poorly done by a researcher who has limited or negative view of deafness

OVERALL

My thoughts and perspectives.....

- We are healthy
- We are proud to be deaf
- We value visual world
- We embrace our deaf identity
- We embrace other cultures (Spanish and Deaf, Black and deaf, Female and deaf, Jewish and deaf, etc)
- We do not need to be fixed but we do appreciate technology advances to help us function better in hearing world (Video phones, cochlear implant, hearing aid, etc)
- We work with hearing people all the time
- We want to be respected for who we are
- We want to be allowed to choose what language is to be our native language not communication choices
- We appreciate the lip-reading and speech language lessons but it Is not a high priority for some of us due to our ability or our needs....

CONCLUSIONS

Thank you for the opportunity to explore an important topic: Mental health of deaf people.

Please feel free to ask any questions or clarifications... I welcome the good dialogue between us....