



# DEAF AND HARD OF HEARING 101: THINGS TO KNOW WHEN WORKING WITH THE DEAF AND HARD OF HEARING COMMUNITY

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In this whitepaper, you will learn:

- An Introduction: The Deaf and Hard of Hearing Culture
- Part 1: How the Deaf and Hard of Hearing Community Communicates
- Part 2: Important Tips for Communicating With the Deaf

## An Introduction: The Deaf and Hard of Hearing Culture

### Who is in the Deaf Community?

Approximately one million people in the US are functionally deaf, and nearly 10 million people are hard of hearing<sup>1</sup>. When people think of the Deaf and Hard of Hearing (HOH), most think of profoundly deaf individuals, perhaps born deaf or became deaf due to a childhood illness. However, the Deaf and HOH community is diverse, with variations in the causes and degrees of hearing loss. A deaf person may have mild to profound hearing loss, and this may be due to a range of possible causes, from repeated exposure to loud noises and disease, to aging and heredity.<sup>2</sup>

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That said, most Deaf and Hard of Hearing do not see themselves as impaired. Two politically correct terms often heard are “hearing-impaired” or “having a hearing loss,” but these are actually considered offensive to the Deaf. It establishes the standard as “hearing” and anything different as “impaired” or substandard. Additionally, many who are born deaf or HOH do not think of themselves as having lost their hearing.



## Unacceptable Labels for the Deaf and Hard of Hearing Community

In addition to the term “hearing-impaired,” there are other terms that have been deemed unacceptable and offensive by the Deaf and HOH community. **Deaf and dumb** is one offensive term that was first used by the Greek Philosopher Aristotle because he incorrectly thought that deaf people were incapable of learning, reasoned thinking, or being taught.



Unacceptable terms:

- deaf and dumb
- deaf-mute
- hearing-impaired

Another offensive term that originated in the 18th century, **deaf-mute**, is technically inaccurate and means silent or without voice. Deaf and HOH individuals use various methods of communication other than or in addition to using their voices, so they are not truly mute.<sup>3</sup>

## Acceptable Labels for the Deaf and Hard of Hearing Community

Most in the Deaf and Hard of Hearing Community would prefer the terms: **deaf**, **Deaf**, and **Hard of Hearing**. In the Deaf community, Deaf is not considered a bad word.



Acceptable terms:

- deaf (condition)
- Deaf (culture)
- Hard of Hearing (HOH)

Use lowercased **deaf** when referring to the condition, and uppercased **Deaf** when referring to the culture or the people as a whole, as you would for the speakers of a shared language (French), a people with a shared history or belief system (Jewish), or a people of shared culture or geographical location (American).<sup>4</sup>

You would refer to someone as **Hard of Hearing (HOH)** if that a person has a mild to moderate hearing loss. These HOH people can sometimes find themselves walking that fine line between the hearing and the Deaf world, while some can comfortably see themselves as a member of both.



# PART 1: HOW THE DEAF AND HARD OF HEARING COMMUNITY COMMUNICATES



How does one communicate with the Deaf and HOH? ASL is the language of the Deaf in the United States, even though the history of American Sign Language is rife with controversy. It was even banned from most schools in the US for more than 100 years due to the mistaken belief that it does more harm than good.

## Why don't the Hard of Hearing and Deaf all know American Sign Language? A Brief History of Deaf Communication in America.

In the 1800s, deaf educators fiercely debated the superior method for teaching the deaf. The two main methods were:

1. Oralism or articulation, the teaching of deaf individuals through speech and advocated by prominent deaf educator of the period Alexander Graham Bell.
2. Sign language, championed by Edward Miner Gallaudet.

In 1880, Deaf educators from all over the world gathered in Milan, Italy to come to a decision about the best way to educate Deaf individuals. However, the event was put on by the Pereire Society, a French association whose purpose was to bring about the general adoption of the oral method.

Edward Miner Gallaudet, a strong proponent of sign language at the time and the founder of the first college of the deaf, wrote of the Milan Convention, "...In arranging for the Convention the promoters of articulation secured every possible advantage to themselves, imparting a partisan character to the whole affair from the very outset... Its formal utterances are no more to be taken as representing the sentiments of teachers of the deaf and dumb throughout the world than are the resolutions of a party nominating convention to be regarded as a fair expression of the opinions of the whole community."<sup>5</sup>

Those who supported oralism were allocated almost three whole days to present; the supporters of sign language,

in contrast, were given three hours. At the end of the conference, attendees voted to ban sign language as a primary means of educating deaf individuals, deciding instead that oralism was the superior method. This was the beginning of the period where deaf children were not allowed to use sign language to learn or communicate. From then on, the Deaf only used and taught American Sign Language in secret.

This view of sign language, though ultimately misguided, persisted for 100 years. This changed in 1960 when the linguist William Stokoe published *Sign Language Structure: An Outline of the Visual Communication Systems of the American Deaf*.<sup>6</sup> Stokoe's research offered compelling evidence that sign language shares the essential characteristics of a spoken language, and he argued that it should be considered equivalent to and afforded the same respect as other languages.

Further progress was made at the 15th International Congress on the Education of the Deaf (ICED) in 1980, where delegates modified the findings of the Milan Conference, and declared that "all deaf children have the right to flexible communication in the mode or combination of modes which best meets their individual needs."<sup>7</sup>

Finally, in 2010, the 21st ICED held a formal vote to do what the 15th had not: they rejected all of the 1880 Milan resolutions, leaving the Deaf community free to be educated in their method, or methods, of choice.<sup>8</sup>

1880 - Milan, Italy:  
Oralism deemed superior method

1980 - Right to flexible communication to meet individual needs

1960 - Stokoe published *Sign Language Structure: An Outline of the Visual Communication Systems of the American Deaf*

2010 - Freedom to be educated in method(s) of choice



## Different Ways of Communicating for the Deaf

Not all Deaf people can or choose to communicate in ASL. While there has been no official count, it is estimated that there are anywhere from 100,000 to 2 million ASL users in the United States.<sup>9</sup> Additionally, adults who become deaf late in life rarely use ASL.<sup>10</sup> As a result, when ASL interpreters are brought in to interpret, they pay close attention at the beginning of the interaction to assess if the Deaf or HOH person communicates only in American Sign Language or in a combination of the methods outlined below.



### American Sign Language

This is the official language of the Deaf and Hard of Hearing Community in the United States, and all ASL interpreters are trained in American Sign Language. ASL has its own grammar and syntax, like any other verbal language.



### English Sign Language/ Signed English

The English Sign Language was invented to help the Deaf and HOH learn English. It's not an actual language, just ASL signs placed in the same order as English grammar and syntax.<sup>11</sup>



### Rochester Method

The Rochester Method was an experiment created in 1878 by Zenas Westervelt, a deaf educator from the New York School for the Deaf in Rochester, NY, which intended to replace sign language and encourage English-only communication through manual spelling.<sup>12</sup> Teachers and students were restricted to using the Rochester Method to communicate. By the 1960s, most schools had abandoned it because teachers and students alike refused to use it due to its tedious and time-consuming nature.<sup>13</sup>



### Home Signs

The use and spread of sign language may be limited if Deaf children do not receive language acquisition in early development. More than 90% of Deaf children are born to hearing parents.<sup>14</sup> When a family only has one Deaf child, as many as 88% of hearing parents may not learn ASL.<sup>15</sup> To communicate with the Deaf individual in the hearing household, alternative home signs are invented. As a result, home signs will differ from family to family. These home signs are unique and often incomprehensible to those who understand ASL.

## PART 2: IMPORTANT TIPS FOR COMMUNICATING WITH THE DEAF



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### Misconceptions When Meeting a Deaf Person

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#### MYTH 1:

*The Deaf can understand speech reading (lip reading).*

In a study done with 112 individuals with early-onset hearing loss, participants were able to lip read an average of 43% of words correctly.<sup>16</sup> This means that out of a sentence of ten words, a deaf individual may only pick up about four of those words. For example, with the sentence, “**He** plays the **bass** in a jazz band **every Monday**,” if lip readers were to only understand the four words bolded, they would miss a lot of the speaker’s meaning.

“...out of a sentence of ten words, a deaf individual may only pick up about 4 of those words.”

#### MYTH 2:

*Speaking slowly or loudly will help.*

Speaking slowly or loudly is usually seen as offensive, as if you talking down to the Deaf person. Refrain from speaking slowly or loudly unless a Deaf or HOH person requests it of you.

#### MYTH 3:

*Writing back and forth in English is fine.*

For many Deaf people, English is their second language. Since ASL grammar is very different from English grammar, writing back and forth may cause misunderstandings.

For example, a Deaf person may write, “I sick know nothing happen last week hit,” which translates to “Doctor, I’m sick, I’m not sure what’s going on. It started last week.” Someone unfamiliar with ASL may instead interpret it to mean, “I’m sick. I know nothing happened. Last week I was hit,” or something equally inaccurate.

#### MYTH 4:

*Family and friends are qualified to interpret.*

Asking family and friends to interpret for their Deaf loved ones may lead to interpretation errors and liability if interpretation mistakes are made. Additionally, when a loved one is sick and in pain, the last thing anyone should worry or stress about is accurately interpreting medical instructions.

*“...when a loved one is sick and in pain, the last thing anyone should worry or stress about is accurately interpreting medical instructions.”*

## What Should I Do Now?

It seems like there are a lot of considerations for what not to do. Now let's focus on what your providers should do when interacting with the Deaf and Hard of Hearing.

### **Use a Certified ASL Interpreter to Communicate:**

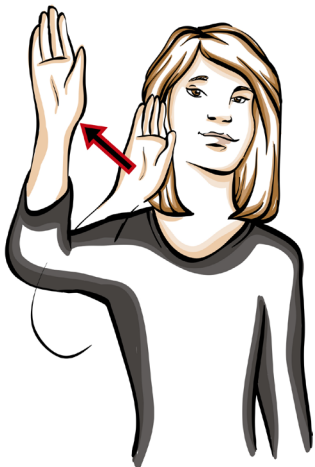
This is the more important rule, and we will go into more detail down below.

## What is at Stake – the Importance of Using Qualified ASL Interpreters

It is required under the Americans with Disability Act and Rehabilitation Act of 1973 to provide a qualified ASL interpreter for patients who are Deaf or Hard of Hearing. When a qualified interpreter is not used for medical interpreting, both the patient the hospital are put at risk. Miscommunication can lead to mistakes in patient health and safety, which may result in serious harm to patients and lawsuits.

## While Using an Interpreter

1. Keep eye contact. Hearing people often speak to each other without keeping constant eye contact. Eye contact is an important part of communication for the Deaf and Hard of Hearing.
2. Speak directly to the Deaf individual and not the interpreter. Avoid speaking as if they are not there or focus on the interpreter.
3. Be aware of your facial expression. In ASL, facial expression is a very important part of the language, and Deaf and HOH will be reading into what your face is telling them.
4. Use universal signs. "Thumbs up" is a gesture everyone knows. So is smiling.
5. Be considerate, learn basic ASL. Making the effort to communicate, however small, makes a big difference in building a positive interaction.



HELLO



THANK YOU



DOCTOR



NURSE

## IS YOUR ASL INTERPRETER QUALIFIED?

Make sure they have:

- A RID (Registry of Interpreters for the Deaf) national certification, or BEI certification. For example NIC (National Interpreter Certification)
- A state license (If required). For example, the Arizona Commission for the Deaf and Hard of Hearing license is required to interpret in Arizona
- 5 years of medical interpreting experience



**About the author:** Victor Collazo is a nationally-certified, professional American Sign Language (ASL) interpreter. He holds a Master-level National Interpreter Certification, and has more than fifteen years' experience interpreting for the Deaf and Hard of Hearing. Victor has held the position of ASL Operations Manager for CyraCom, an international interpreter company specializing in phone and video interpretation, for the past seven years. His primary responsibilities include overall management of the ASL interpreters and overseeing CyraCom's ASL-interpretation line of business. Victor holds a bachelor's degree from Rutgers University in Science, and earned a degree from Camden County College in ASL Interpretation. He is fluent in three languages: English, Spanish and ASL, and is currently studying German. Victor hosts annual community forums for the Deaf and Hard of Hearing community, where he discusses relevant issues pertaining to video interpretation.

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