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Counseling and educating deaf individuals

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Abstract

Counseling and educating deaf individuals involves unique and important skills that professionals need to have. This paper researches different areas of concern, including ethical dilemmas facing the deaf culture, the importance of clear communication, appropriate uses of interpreters, and the importance of confidentiality in counseling. A project was developed in conjunction with this paper, which includes flash cards with some basic signs. These flash cards could be used in a variety of settings, including a classroom. Future research areas are also discussed, including the use of new technologies and continued observation of the differences in diagnoses between hearing and deaf clients.

Running head: COUNSELING AND EDUCATING DEAF CLIENTS

COUNSELING AND EDUCATING DEAF INDIVIDUALS

A Research Paper and Project

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Master of Arts

by

Sarah R. Zollar

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COUNSELING AND EDUCATING DEAF CLIENTS

This Research Project by: Sarah R. Zollar

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has been approved as meeting the research paper requirements for the Degree of Master of Arts..

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COUNSELING AND EDUCATING DEAF CLIENTS

Abstract

Counseling and educating deaf individuals involves unique and important skills that professionals need to have. This paper researches different areas of concern, including ethical dilemmas facing the deaf culture, the importance of clear communication, appropriate uses of interpreters, and the importance of confidentiality in counseling. A project was developed in conjunction with this paper, which includes flash cards with some basic signs. These flash cards could be used in a variety of settings, including a classroom. Future research areas are also discussed, including the use of new technologies and continued observation of the differences in diagnoses between hearing and deaf clients.

Counseling and Educating Deaf Individuals

Being able to communicate effectively with deaf individuals is important in both the classroom and counseling sessions. The project developed consists of large flash cards that can be used to teach professionals or other hearing students ways to communicate with deaf individuals in their lives. They could also been used with other populations, such as those who are developmentally delayed, if they are also taught the same signs in order to communicate. The cards developed are a starting point, and are not intended to exhaust the number of signs needed to communicate in American Sign Language (ASL) fluently.

The purpose of this paper will be to educate the reader about the cultural awareness necessary to counsel and educate deaf clients effectively. As the deaf culture is unique, special efforts must be made by counselors and educators to be knowledgeable about the pride that many feel in being deaf. Counselors and educators must also ensure that they are aware of the ethical concerns that must be considered when counseling or teaching a person who is deaf, including the use of interpreters. Assessments given to clients need to be evaluated for appropriateness, as some sign languages (including ASL) may give a false impression of a lack of education, as the phrasing in ASL is not performed in traditional English. The deaf community is under served in the area of mental health counseling, as it takes time to develop trust with counselors who are hearing.

Understanding Deaf Culture

The deaf culture is one where many of its members take a distinct pride in their language and their community. The preservation of sign language, despite the efforts of oralists to change focus from sign language to being able to lip read and communicate verbally, is one of the ways in which deaf culture is seen (Burch, 2004). Filer and Filer state that “ASL still must be considered the single most important element that binds the deaf community together” (2000, p. 38). Easterbrooks (2008) states that teachers need to be aware of deaf culture and communities. Counselors need to be aware of the same. One of the most important components in being able to counsel deaf clients effectively is acknowledging that the deaf culture is different from the therapist’s culture (if the therapist is hearing). As when working with a client whose background is different than the therapist, it is important to acknowledge this in the therapeutic relationship.

The deaf culture has a rich history, including many advocates who proposed improvements throughout the last centuries. According to Esmail, in the 1800's there was debate regarding the best way to teach deaf children to communicate, whether it was orally, in sign, or a combination of both. Oralists thought that if a person signed, they were not capable of abstract thought or constructs. It was also thought they would not be able to write grammatically correct English. Edward Miller Gallaudet read poetry written by a deaf person to help refute this concept to a commission who was evaluating this issue. Deaf students were also put on “display” in an effort to show they had the same

abilities as other students. “During these school demonstrations, deaf pupils presented readings in signed languages, gave dramatic performances, executed mathematical and other exercises at the chalkboard, and answered questions from the audience” (p.350).

This is a debate that continued through the 1980's. Through other means of advocating, the deaf community fought to be recognized as its own unique culture where deafness is not seen as a disability.

Ethical Concerns Involving Deaf Culture

One unique ethical concern that counselors and teachers need to be aware of includes the use of cochlear implants to assist deaf children with being able to hear.

Parents need to be given all of their options, and not just from medical professionals.

They need to talk to others who are deaf about their experiences and find out about social issues that may arise with whichever decision they make (Hyde & Power, 2005, p.105).

Hyde and Power also review an ethical question that may arise if people chose to remain deaf, rather than try to gain some hearing by using a cochlear implant: Will the government continue to pay for services if deafness is something that can be “fixed”?

Leigh and Maxwell-McCaw did research on the psychosocial adjustment of adolescents who have cochlear implants. They found that “how parents and the educational system met the psychosocial needs of these deaf adolescents is of more importance than whether or not the adolescent has a CI” (2008, p.257). Another ethical issue that may come up is the idea that deaf families may try to deliberately have a deaf baby through genetic selection, while others may do the opposite. (Johnston, 2005)

Counselors who diagnose deaf clients need to ensure that their diagnoses are accurate, and are not a reflection of a difference in culture. In an article written by Black & Glickman (2006), the authors compared diagnoses of hospitalized clients who were deaf to those who were hearing. The clients were all hospitalized in the same state psychiatric hospital, however, the clients who were deaf were in a Deaf unit. While the authors compared all diagnoses, they focused on significant differences that they found. These include psychotic disorders, PTSD, mood disorders, developmental disorders, substance abuse disorders, and personality disorders. One of the most significant was the fact that 88.9% of hearing clients were diagnosed with a psychotic disorder, while only 28% of deaf clients had the same diagnoses. There was also a large difference in the frequency of PTSD as a diagnosis. 29.7% of deaf clients compared to 6.6% of hearing clients were deemed to be suffering from PTSD. Mood disorders were diagnosed in 39.1% of deaf clients, while 8.8% of hearing clients were diagnosed. Clients who are deaf were diagnosed with a developmental disorder (including MR) at a rate of 25%, while hearing clients who were diagnosed at a rate of 6.6%. When evaluating substance abuse, the researchers found that 33% of deaf clients were diagnosed with some type of substance abuse concern, while 41.6% of hearing clients were given this diagnoses. Finally, deaf clients were evaluated as having a personality disorder in 44% of cases, while hearing clients were evaluated in 21.6% of cases.

Confidentiality is another extremely important ethical aspect of counseling deaf people. As the deaf community is small, everyone tends to know everyone's business.

Peters (2007) suggests “discussing anticipated confidentiality concerns at the very beginning of counseling” (p.187) as a way to address this concern. Peters also suggested getting the client’s input regarding confidentiality throughout the counseling relationship (p. 187).

Other Uses of Sign Language

Sign language is recognized as a foreign language in many high schools throughout the nation, and the number of classes available increased 1200% from 1992 to 2000 (Rosen, 2008, p.28). Rosen postulates that this is from an increased number of deaf and hard of hearing students who have been mainstreamed into the public school promoting interest among teachers and students to learn ASL.

In addition to being viewed as a foreign language by high schools and colleges, sign language has been used with younger individuals. Brereton (2008) presented a case study of a hearing, pre-school aged girl who had difficulty with being aggressive and lacking appropriate social interaction with her peers. Her teachers struggled with always correcting her and not being able to focus on her strengths. The teachers in her classroom began teaching the students ASL, and the girl excelled in her learning of this language. Brereton states that this helped her in three ways. By teaching her ASL, her teachers gave her an opportunity to communicate her feelings through sign when she was dealing with extreme emotions, including anger. The second way learning ASL helped her was by giving her teachers something to praise her about instead of continually correcting her. She was able to help the other children in the class and touched them in a gentle way in

order to do so. The third way learning ASL helped the girl was by giving her an acceptable way for her to move during their circle time. Before this, she had difficulty sitting still and was corrected many times for this. New signs were shown during circle time, and she would be praised for practicing them, enabling her to focus more on what was being discussed.

Skills Needed for Teachers and Counselors

There are a variety of things that teachers need to do in order to help enhance their students learning and potential academic success. Teachers need to ensure that they are teaching through different manners of communication. It is important for students who are deaf to be visually taught in order to help keep them focused (Corina & Singleton, 2009). It is also important for teachers to encourage the highest level of parental involvement, as DeLana, Gentry, and Andrews (2007) found that the level of parental involvement correlates with success in the school setting. They also found that a combination of factors was also helpful to students, including the parents' skill level in ASL and the students' length of time using ASL.

According to Easterbrooks, both teachers and parents need to continue to improve their communication skills continually. Easterbrooks also shared that teachers need to ensure that communication is understandable in all forms and that miscommunications are cleared up as soon as possible. According to Filer and Filer (2000), many deaf people have had frustrating or negative experiences with those who are hearing because communication can be difficult if everyone involved is not patient. Being willing to ask

the person to repeat themselves in both sides of the conversation is important. Raising one's voice and using larger lip movements are things that people unfamiliar with deaf people do, which does not help when communicating. According to Filer and Filer, it is also important for the counselor to not tell the client "'never mind' and 'I will tell you later'" if communication becomes difficult (2000, p.41). When using videos in a presentation or a session, it is important for the counselor or teacher to be sure that the material is closed captioned and that they know how to activate this option on the technology they are using (Filer and Filer, 2000, p. 41).

Convertino, Marschark, Sapere, Sarchet, and Zupan (2009) studied deaf college students and evaluated what indicators would help predict academic success. They determined that "there appears no better predictor of academic performance than coming into the classroom prepared in terms of content knowledge, learning skills, and communication flexibility" (p. 338). ACT scores were also good predictors of success in the academic setting. Communication preference between sign language and oral communication did not have an impact on academic success at the college level (p.335). As a result, teachers and counselors need to make sure that students and clients have access to the communication style they prefer.

Use of Interpreters

In order to ensure that teachers and counselors are able to communicate effectively with their students and clients, interpreters need to be used when the professional is not fluent in ASL. According to Easterbrooks (2008), teachers need to use qualified

interpreters who are able to interpret in the school setting effectively. It is very important for the counselor not to use children or other family members as interpreters. According to Filer and Filer, “one could imagine how difficult it would be for the nonprofessional to accurately translate when what is being said is disagreeable to his or her, highly emotionally charged, or offensive to him or her” (2000, p. 40). When calling a person who is deaf, it is important to use either a Relay service, or to use a TTY, rather than asking for a hearing person in the home to interpret.

According to De-Bruin & Brugmans (2006), there are various roles that the interpreter may play in a counseling session with a deaf client, including being a strict interpreter. They also suggested that interpreter may only relay the conversation word for word or the interpreter can play a role in explaining deaf and hearing cultures to both the therapist and the client. The authors also suggested that the interpreter could act as a “‘paraprofessional’ who has specific responsibilities to carry out during the therapy in addition to those of the therapist” (De-Bruin & Brugmans, 2006). It is important for the counselor and the interpreter to meet before working together to determine what will be the most effective role for the interpreter to take in the sessions. De-Bruin & Brugmans (2006) also suggest a pre and post meeting with the counselor and the interpreter to process the session, including allowing the interpreter to express their thoughts and feelings regarding their perceptions of the client’s communication abilities. This also helps the client from connecting to the interpreter outside of the session.

Use of Assessments

Professionals using assessments with individuals who are deaf need to take into consideration that most assessments are not normed for the deaf population. Easterbrooks (2008) states that teachers need to use assessments that are normed for deaf and hard of hearing students. In Cawthon's (2006) article, she discusses the need for educational systems to assess a child's need for accommodations or alternate assessments individually, not based only on their disability. Cawthon evaluated and discussed the results of the *National Survey of Accommodations and Alternate Assessments for Students who are Deaf or Hard of Hearing in the United States*. Accommodations for testing in the schools included extended time for taking tests, having the directions interpreted, and being in a separate room from others also taking the test. Alternate assessments include taking an assessment that is at a different grade level or making a portfolio, rather than taking an assessment. Both accommodations and alternate assessments provide validity concerns according to Cawthon, as there have not been studies showing the impact that each area has on the validity of the overall assessment.

Discussion

A variety of articles were reviewed to give counselors and educators an idea of concerns and issues to take into account when educating and counseling clients. The project developed is intended to help professionals with learning and potentially teaching signs as a way to improve communication with people who are deaf. There are several limits to be considered in this review. While ASL was examined during this review, there

is another form of sign language used in the United States called Signed Exact English (SE2). The deaf community typically identifies ASL as their language choice, which is why it was focused on in this article, but it is important to note that SE2 is also used. The history of deaf culture and how it came to be is a topic that could be explored in more depth. One key thought that should be kept in mind is the fact that the statements made in this paper are generalizations. In the deaf culture, as in all cultures, there are a variety of issues and strengths that reveal themselves in each individual and this is what needs to be focused on, rather than general facts.

Further research in various areas is necessary. This includes new communication technologies and how this impacts servicing deaf clients and students. Many people in the deaf community utilize special cell phones to text back and forth with others, as opposed to using TTY's. Continued examination of different diagnoses that may be given on the basis of misunderstanding the deaf culture is also necessary.

Conclusion

Counselors and educators need to use different methods of communicating important facts, which is what prompted the development of the full sheet examples of basic signs for a classroom for this project. There are pictures of the sign being demonstrated, a type written word, and on most sheets, an example of the word. These cards could be used in a variety of settings, including the Price Lab and River Hills Schools in an effort to encourage the students to interact in a more meaningful way.

Students and teachers could use the examples given to them and make new sheets for new signs as their vocabulary grows and expands.

Counselors and educators sometimes interact with people of the deaf culture and need specific knowledge in order to encourage and teach them in the most ethically helpful way possible. Communication is key in both counseling and teaching. Being able to work with interpreters in an appropriate way is imperative in being able to communicate effectively with deaf people. Considering the ethical dilemmas that are facing the deaf culture and advocating for clients and students so they have access to the same information that others do is imperative for the deaf culture and for deaf individuals to continue to grow.

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