

Allison Puryear:

Welcome to the Abundant Voices series, a monthly episode of the Abundant Practice Podcast. This series features educators, experts, and stories from typically marginalized members of our community. You'll hear from Black, Indigenous and other people of color, LGBTQIA+ folks, neurodiverse therapists, and other clinicians whose voices deserve to be heard by a wider audience. We talk about things we may shy away from because it's the right thing to do, but also because it impacts our practices and the therapy we provide. We financially support these guests and encourage you to monetarily show your appreciation for what you've learned from them and their emotional labor. Visit our podcast show notes at abundancepracticebuilding.com to donate directly to them or a nonprofit they've requested.

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Welcome back to the Abundant Practice Podcast. I'm your host, Allison Puryear, founder of abundancepracticebuilding.com. I am here with Katheryn Barton. I'm really excited to have this conversation. Thank you so much for being here, Katheryn.

Katheryn Barton:

Yay. I'm very excited to be here. Thanks for the invitation.

Allison Puryear:

Absolutely. So, okay, we're going to talk about working with the Deaf and hard of hearing community, or communities. And there's a lot that most therapists don't know that they don't know about Deaf culture. Unless you've had experience with Deaf culture I was sharing before we started recording that I have worked with one deaf client in all my years as a therapist, and it was years ago. And so I told you if I step in crap, it's okay to say it. Let me know in the interview if I say something, I use the wrong term, I say the wrong thing. So I'm learning here too. Y'all, this is how we learn. I'm okay being called out.

Katheryn Barton:

I think that would be a part of Deaf culture too, letting you know.

Allison Puryear:

Absolutely. So can you tell us some about what got you interested in working with Deaf clients? We should also say you're able to hear, you're not deaf or hard of hearing, so we should say that too.

Katheryn Barton:

We should, yes.

Allison Puryear:

Can you tell us some of what got you where you are now?

Katheryn Barton:

Yeah. So just to put that out there as a hearing person I'm sharing my experiences as a hearing person, working with the Deaf and hard of hearing clients and communities.

So what got me started? Well, I started interpreting in 2010. Kind of an interesting thing about being an interpreter, which I think a lot of people maybe don't know, is you need to go into your job without bias. So say you go into a job and it's something that maybe you disagree with or don't believe in, but the client who's there, they're there for the message. So it's really important to be able to put out that message without the bias. And so there were times where I would go to work and my job is to be the bridge of the community, be a bridge of language, be a bridge of communication, be a bridge of culture. And so there were times where I was like, wow, I can do so much more than just provide information. I want to do more. I want to help people on a deeper level, on a more personal level than just offering information or being that bridge. So, that was a wake up call for me of I can do so much more. And so then I kind of decided, all right, I'm going to go back to school. I'm going to go back to school to become a counselor, and that's what I did.

So I kept interpreting all through that. I still interpret now. And then I didn't necessarily just go to school for counseling to work with Deaf and hard of hearing clients. I went to school for counseling because I wanted to be a counselor. And then I was like, how cool is it that I know sign language, I can work with clients who are deaf or hard of hearing who use sign language, and then they don't have to bring in an interpreter. They have a third party in their sessions where they're talking about their deepest struggles or they're talking about their greatest successes or whatever. There isn't that extra person in the room. So I thought that that would be a really awesome addition.

Allison Puryear:

Well, and you mentioned not having to have an interpreter in the room. And this is something that I think we should make sure everybody knows that per the ADA, American Disabilities Act, if we have a deaf client call us or email us and say I want to work with you and you don't know sign language. You are responsible for making sure that there is an interpreter there.

Katheryn Barton:

So this is kind of tricky. It is part of the law, equal opportunity, it's also part of the ADA, which is also part of... Hold on, I have notes. It's equal opportunity for everyone, so they're no discrimination. So for me, I don't have to hire an interpreter, but if someone does call you and they're deaf or hard of hearing and they need services I think the first thing to do would be to ask them, hey, what's your preferred method of communication? There is a spectrum of deaf and hard of hearing levels. Some use sign language, some people prefer captioning, some people prefer to read lips, some people don't know sign language at all, but still have hearing loss. So I think the first step would be to ask, what's your preferred type of communication? If you need an interpreter, let's figure out what that looks like.

So say I'm in private practice and it's just me and I live in Missouri, so to hire an interpreter in Missouri, interpreters require a two-hour minimum. So if you hire an interpreter, they're coming to whatever the meeting is for two hours and you're paying them for two hours. So, say you call an agency and they're like, okay, we charge \$100 an hour for an interpreter, and you take them for two hours, that's \$200. So say, I charge my client \$150 per se. So how do we do that? So am I going to pay \$50 to work with my client? That's not really feasible. The best option there is to refer them out to an agency who has the

resources to do that, and that's okay. That is under the umbrella or the stipulations of the ADA, because that's still offering them equal opportunity to go somewhere where they can provide interpreters for them. Does that make sense?

Allison Puryear:

Yeah, it does. It does.

Katheryn Barton:

Because I know that seems scary. Like, oh no, how do I provide services for this person but not go bankrupt?

Allison Puryear:

Right.

Katheryn Barton:

And that could be scary. But then say there's someone who's like, hey, if I'm sitting in a room with you and it's quiet and it's just the two of us talking back and forth and I can read your lips, that's awesome. That's great. We can do that. Some clients might also be like, hey, can we do it online so that I can have captions along the bottom of my screen of what you're saying to me? So really putting the client in the driver's seat of what they need, what they prefer, and then helping them figure out how that works.

Allison Puryear:

And I love trusting their experience and asking them what they want. When the client I'd had that was deaf emailed me and I was like, oh, I don't know. Where do I find an interpreter? What do I do? And I asked a friend of a friend I was linked up with who had more experience with the Deaf community and culture than I did. And that was their recommendation is ask the client and this client read lips and spoke totally clearly. And so that's how we did therapy in person, this was long before online therapy was a thing. And so rather than freak out like I did initially of how do I provide the best services for this person and I'm in this really specific niche, and I have to make sure that he get everything that he needs out of this experience, both from a legal and an ethical perspective and spinning out, which I'm apt to do. I'm glad that I asked around, who can I talk to about this, who knows what's going on? So that I didn't end up bringing an interpreter that wasn't necessary.

Katheryn Barton:

Sure.

Allison Puryear:

So can we talk some about Deaf culture and what most of us who are hearing therapists might just have no idea about unless we're friends with deaf folks or have deaf clients.

Katheryn Barton:

Sure. So there's a lot, but I'll just give you some of the stuff that stands out for me. So 90% of people who are born deaf are born into hearing families. That's something to think about. So that kind of depends on what that family decides to do. You're two hearing people and you decide, oh wow, we have a deaf child. What are we going to do? Are we going to encourage sign language? Are we going to

learn sign language? A lot of parents don't learn sign language. And that's a whole thing. Are we going to do a cochlear implant? Are we going to get hearing aids? So many things.

But then the people who are born deaf into a deaf family whose parents are deaf and they grow up signing, those are different, it's a different experience, obviously. So there's something in the Deaf culture where they differentiate saying, big D Deaf and little D deaf. So Big D Deaf is Deaf spelled with a capital D and so that would be someone who's I'm deaf, I'm proud, and you grew up signing, my family signs. It's all yay Deafness. This is our culture. We love it. And then little D deaf is more individuals who maybe don't identify with deafness in the same way, obviously. So it's more of, oh, maybe I read lips or maybe I don't know, sign language or maybe I learn sign language later on, things like that. So they're like, yeah, I'm deaf, but it's a little D deaf. So I think is interesting, pretty cool the way they could talk about that and they'll write it. So, that's something that I'm thinking a lot of people don't know about if you're not in that.

Other things, the Deaf community is actually a pretty small community. So when you meet a deaf person or a deaf person meets another deaf person, they might ask, who are you related to or who do you know? Oh, yeah, I know that person too. Or, oh, that's my cousin, or whatever. And so that's something to think about of how it's close-knit that way.

Another thing to think about or that they might think about of what kind of gossip is going around or who might know my story, and that's why confidentiality is so important. Can I trust that this information isn't going to get out to the community? So I think that could be something that might even deter some deaf people from seeking therapy. That could just be a guess on my part, but that's something that I think is important. I'm not sure what else.

Allison Puryear:

Yeah. Well, I think there's some controversy around some things in Deaf culture that Hearing culture just has no idea about too, like cochlear implants. We've all seen the videos online of the toddler getting their cochlear implant and hearing for the first time, and oh, it's so beautiful and all of that. So can you talk a little bit about... And I'm wondering if we should back up and talk about when we say Deaf culture, we mean an actual culture. We're not just saying Deaf culture as saying Deaf people, there's a culture around deafness.

Katheryn Barton:

Yes.

Allison Puryear:

So can we talk some about why some people aren't fans of cochlear implants or hearing aids?

Katheryn Barton:

Sure. Well, and if you think about Deaf culture of where it's come from, they used to be so isolated. In order for them to get any information, they'd have to go to Deaf clubs and chat. They don't get in the car and turn on the radio and listen to the news and know what's going on in the world. And we might take some of that for granted, we can turn on the TV and information's just pouring into our ears and our head. They have to seek it out a little bit more.

So then when you talk about cochlear implants, I think it's that idea of having to fix something. And for a lot of people, it's like, I'm not broken, so I don't need anything fixed. I'm Deaf and this is my culture, this is my life, this is how we do things, and it's great. But then for some people it's like, but I want my child

to hear. I don't know. So I think it kind of depends what it is for you and how you perceive it. And if you see it as a disability, as something that's maybe holding you back. But there are people that do both. There are people who have cochlear implants and use sign language. There are people who have cochlear implants and then take them off because they're like, okay, I don't want to hear anymore today. Come home and they're like, okay, yay, I can relax. I can take things off. Or even just with hearing aids.

So I guess the controversy would be, are you telling me that I'm not good enough because I can't hear? And then perceptions around that, and I guess what you're taught.

Allison Puryear:

Right. What I think about too identity first versus person first language, and how I feel like autistic folks are really taking a big leap forward with that. I'm an autistic person, I'm not a person with autism. This is a part of who I am. And I think about we're saying Deaf people, not people with deafness, and there's a ownership of this is a part of who I am. I think also, we're not talking about people who are coming to therapy because they've just become deaf and they're adjusting to new deafness. We're talking about more the culture of being deaf or of whether that's being born deaf or happening earlier on in childhood, and not like I was in a car accident and lost my hearing. But I'm sure this-

Katheryn Barton:

They would be in counseling too.

Allison Puryear:

Yeah. Oh, for sure, for sure.

Katheryn Barton:

There is such a spectrum too, because there's people who become deaf later on or even after they've learned to speak and then they become deaf. And so then it's like, oh, well you speak so well. It's like, sure, I speak well but I'm still deaf. And things where they say some disabilities you can't see or invisible, I guess they say. And so it's one of those things too, where it's walking down the aisle in a grocery store and someone yells at you to get your attention, and they don't respond because they can't hear you. And then us thinking, oh, that person's so rude. When really, no, they just couldn't hear you. Now, who's rude?

Allison Puryear:

Yeah. And so for your clients, whatever reasons they're coming into counseling for, they're not coming in because they're deaf, they're coming into counseling and they're deaf.

Katheryn Barton:

Right.

Allison Puryear:

So how can other therapists navigate learning about Deaf culture, owning that they're still learning with that client, so that the client understands that they don't know all the info yet. What would you recommend for therapists to get them kind of caught up quickly? If it can be a catch up quickly situation.

Katheryn Barton:

Well, the times we're living in now, I think there are so many resources out there. You can get online, you can get on Instagram and you can put in Deaf and all of these things will come up. And some of them will have captions and stuff, so it's like, oh, okay, I can kind of see. And they talk about issues surrounding Deaf and hard of hearing culture, and that's one way.

I think good research, what's going kind of in your community, what resources are out there for clients who are deaf and hard of hearing, what agencies you would contact with if you would need an interpreter. Also, if you're wanting to learn so much more about culture, read a book that's about the main character is deaf. There's a ton of those out there. Things that are on the forefront for me right now obviously is the movie CODA, that CODA, Child of a Deaf Adult. So that's another part of the spectrum of someone growing up who's hearing, but your parents are deaf and learning sign language that way and then maybe learning to speak later, or not speak, but talk or English later.

So, movies, there's things on Netflix. There's Audible by Nyle DiMarco, which is on Netflix you could watch. There's Deaf U on Netflix. Nyle DiMarco, he was on Dancing With the Stars, and he just wrote a book, Deaf Utopia, and then he has a foundation. And then there's another book out there that's called True Biz by Sarah Novic. And so those are all things that you know, you could learn about the culture, I guess those would be easy ways.

Allison Puryear:

Yeah. Well, I love that, you know, weren't like, well, here are all these textbooks about deaf culture. You're going to be on Netflix anyway, let's choose something that is made to entertain and educated at the same time.

Katheryn Barton:

Well, and it's visual. So if you want to talk about sign language and communication, so sign language, you're signing language, but there's so much to it. There's gestures, there's facial expressions. ASL is its own full language, it's not just English being signed. So that's a whole 'nother thing. Certain facial expressions are grammar and then syntax, it's all a part of it. So yeah, I think you're not going to learn a ton about Deaf culture through a textbook. I mean, I [inaudible 00:18:05] textbook in school, of course, but I also had teachers who were deaf who were teaching me about Deaf culture and teaching me the language. So, probably I would say a more interactive culture, I guess, thing to learn about it. That would be a better way to do it anyway.

Allison Puryear:

Yeah, so good. Anything else you can think of that you really want other therapists to know or understand?

Katheryn Barton:

Yes. So working with an interpreter. So when you're working with an interpreter, some things to know. So first things first is the client. You're always wanting to focus on the client. We'll have an interpreter next to us, you might be inclined to turn to the interpreter and say, tell them, or please tell her this, or whatever. When that's rude. That's rude. Because no, you're sitting there with the client, the interpreter is a bridge, the interpreter is the communication. So it's important to look at the client and ask them, how do you feel about whatever? So you're looking at the client, you're making eye contact, you're asking them directly. Then the interpreter will sign that to the client, the client will sign their answer

back, and the interpreter will speak the answer to you and then it becomes fluid after a while. So that's important to make sure you're addressing the client.

But then also it's interesting within a counseling situation or with mental health. So I've been in a situation before where the client would maybe repeat a word, they'd be like, I want to go home, home, home or something. And so the interpreter would voice it like that. I want to go home, home, home. And so then that's something to think about as a counselor of, hmm, what's that? Is that part of what they're struggling with? Is that language? Or did the interpreter make a mistake? And so that could be something where another thing, working with interpreters, how you would address that because maybe you'd want to ask the interpreter... Or well, I guess you would ask the client maybe want to clarify, oh, you repeated home three times or something. You could approach it that way. But then also you might want to be inclined to ask the interpreter some things that maybe they notice. At the same time, it needs to be done in a way where the client doesn't feel like maybe you're talking about them behind their back because the client still needs to feel comfortable and have that trust.

Because that's also something within, I think a part of growing up deaf is you might look across the room and see people talking and you can't hear what they're saying so you don't know what they're talking about. Sometimes they might assume, oh, they must be talking about me. Then that has these kind of feelings of what's going on, and I don't know. So I think I kind of got off track there, but just a thing to think about when you're working with an interpreter.

Allison Puryear:

And I can imagine if in session you're seeing your client turn to this other person to watch them sign, it would be easy to also turn to that interpreter and take your focus off your client. I see how that could happen accidentally, even if you were trying to stay focused on your client. So I think just being aware that that's just so important so that they recognize this their session, this is about them, and this is not between you and the interpreter.

Katheryn Barton:

And you could set that up. That's another thing you would talk about is what's the best place for the interpreter to be in the room. They could be behind you, they could be next to you, whatever works best for you and the client to make it smooth. I don't know, anything else that seems important to share? Any other questions for me? I know I have some notes.

Allison Puryear:

I can't think of any others, but if you want to look at your notes and see if there's anything that you want to make sure we talk about.

Katheryn Barton:

No, I mean I think we touched on most everything. Yeah.

Allison Puryear:

Awesome.

Katheryn Barton:

Another thing, there's always that intersectionality aspect too. So, like you said earlier, I'm not coming to therapy because I'm deaf. I'm coming to therapy because I have all these other things going on.

Maybe I have some mental health struggles, maybe I have some identity struggles. Maybe I'm LGBTQ and what's that look like and what's that look like within the Deaf culture too? So thinking about all of that of there could be so many things going on with them. And then the idea of language deprivation and how that affects someone who is born deaf and their parents are hearing and their parents don't bring sign language into their life early on. We learn so much of our language from 0-3, 0-5 And if we're not getting that input that we can understand, then so many of those synapses don't happen. And so something that I think that you can think about of the longevity and how that affects development, brain development, language development. So that's something about too, how it can play a role.

Allison Puryear:

Absolutely. Well, thank you so much. I feel like this is something we don't talk about a lot in the therapist community, and this is a sizable percentage of the population that we need to be able to take good care of and work with. So, thank you so much for educating us.

Katheryn Barton:

Well, thank you. Well, and if anyone is inclined to learn more about the culture and dive in, I think it would be great for them to have so many more options of therapists to choose from too.

Allison Puryear:

Awesome. Well thank you so much, Katheryn.

Katheryn Barton:

Thank you.

Allison Puryear:

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