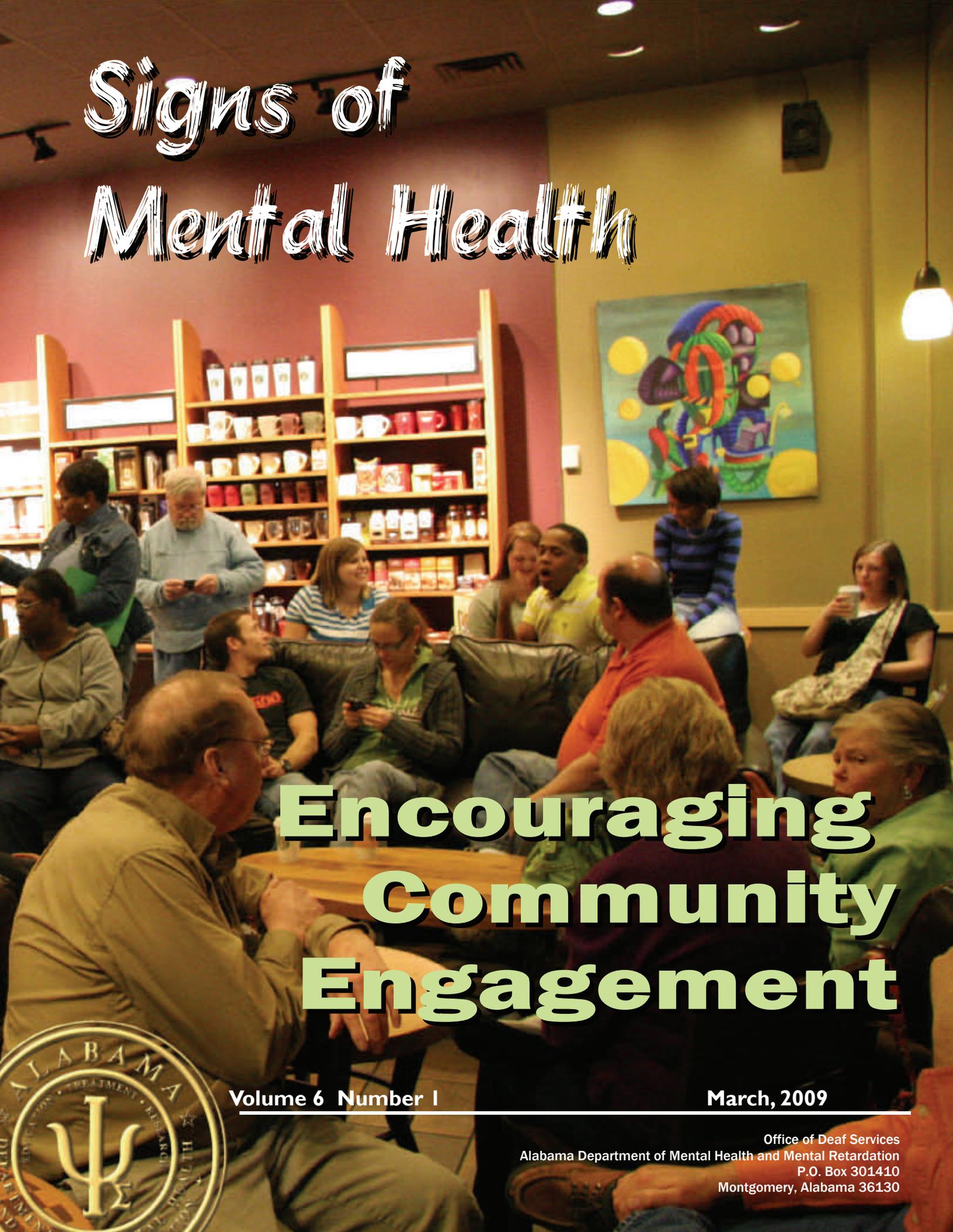


Signs of Mental Health



Encouraging Community Engagement

Volume 6 Number 1

March, 2009



Office of Deaf Services
Alabama Department of Mental Health and Mental Retardation
P.O. Box 301410
Montgomery, Alabama 36130



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Signs of Mental Health
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Editor's Notes:

Signs Of Mental Health has a new look. We have been encouraged by reader response to our e-zine over the 6 years we have been publishing it. Looking back to the earlier issues (which were laid out in Microsoft Word, no less!) we can see how “SOMH” has evolved in sophistication just as Deaf Services in Alabama has evolved. It’s been a fun journey.



We have a lot of neat things going on, in spite of the slumping economy and shrinking state budget. You will enjoy reading about efforts ODS staff are making to engage the Deaf Community. It’s our cover story this month. We also report some really great partnership efforts with some sister agencies. One of those is a project to offer training opportunities for pre-certified interpreters and other professionals in deafness. Another is working with ADRS and AIDB to provide assessment of readiness for students entering the interpreter training major at Troy University.

One really important story is the new Friends of the Bailey Deaf Unit and its upcoming inaugural benefit event. Be sure to check it out on page 7. We also welcome Lisa Trainor as the Region III interpreter. This is the first time in several years we have had all the interpreter positions filled. Lisa brings a lot of experience to the job.

Speaking of experience, our “old hand” Charlene Crump was named Employee of the Quarter by Commissioner John Houston. We are proud as can be for her! Read about it on page 5.

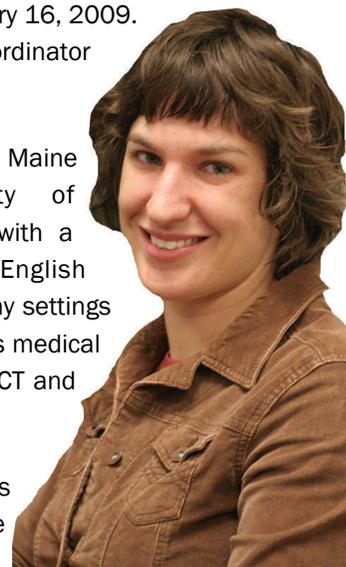
Please let us know what you think of the “new” SOMH and give us your suggestions for making it better. ✎

Trainor New Region III Interpreter

Lisa Trainor joined the Office of Deaf Services on January 16, 2009. She is filling the vacant Region III Interpreter Coordinator position and is based out of Montgomery.

Lisa has recently moved to Alabama from Portland, Maine where she graduated from the University of Southern Maine with her Bachelors in Linguistics with a concentration in American Sign Language/English Interpreting. Since graduation Lisa has worked in many settings including K-12 and post-secondary education as well as medical and mental health settings. She holds her RID CI and CT and is working towards her QMHI.

Lisa lives in Birmingham with her dog, Sophie and keeps busy by rock climbing and mountain biking in her spare time. ✎



On The Cover:

Deaf people from all over central Alabama meet monthly at a Montgomery Starbucks for “Deaf Coffee Night.” This gives new signers a place to hang out with Deaf people in a non-threatening environment.

Troy Taps Talents of Teams

The Office of Deaf Services is partnering with the Alabama Institute for the Deaf and Blind and The Alabama Department of Rehabilitative Services to provide Sign Language Proficiency Interviews for Interpreter Training Program prospects.

Troy University professor Jan Oliver contacted Tammy Adams, the State Coordinator for the Deaf at ADRS about getting SLPI evaluations, which are required for students wanting to major in interpreting. The challenge was getting the evaluations done in a timely manner. Ms. Adams then contacted AIDB who tapped Ricky Holman to assist.

While various agencies have sign language proficiency requirements for staff working with deaf consumers, the Alabama Department of Mental Health has codified those requirements in terms of SLPI scores for several years. As a result, the Office of Deaf Services Communication Access Team has developed a well-respected evaluation process. In addition, ODS has

trained SLPI evaluators for other agencies. (See Signs of Mental Health volume 5, number 3.) To Adams and Holman, it made perfect sense for ODS to be asked to coordinate the evaluations. "This is a good way for our agencies to partner and support the interpreter training program," said Holman.

The Sign Language Proficiency Interviewed is a norm referenced assessment of linguistic competence in American Sign Language. Scores range from No Functional Skills to Superior Plus, the latter being the level one would expect from a native signer with extensive linguistic training/experience. Community and Facility program standards from the Department of Mental Health, Division for Mental Illness have minimum SLPI score requirements for positions that work with deaf consumers. These requirements range from Intermediate (conversational skills) for some non-clinical direct care positions to Advanced Plus for therapists and program directors.

Holman, Adams and Steve Hamerdinger, ODS Director, met to work out details. Just as the Interpreter Training Program itself is a joint effort of several



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DEAF SERVICES REGIONAL OFFICES

Region 1

Wendy Lozynsky, Therapist
Dawn Marren, Interpreter
Mental Health Center of
Madison County
4040 South Memorial Pkwy
Huntsville, AL 35802
(256) 533-1970 (Voice)
(256) 533-1922 (TTY)

Region 2

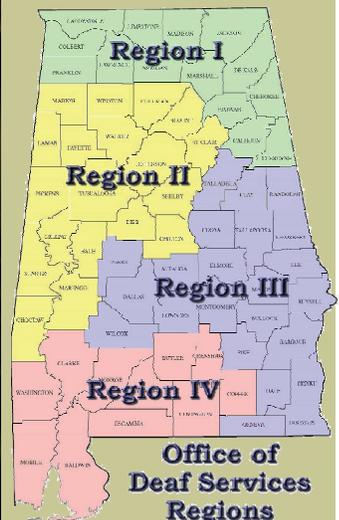
Sereta Campbell, Interpreter
Bryce Psychiatric Hospital
200 University Boulevard
Tuscaloosa, AL 35401
205.759.0698 (Voice)
205-759-0890 (FAX)

Region 3

Ben Hollingsworth, Therapist
Lisa Trainor, Interpreter
Montgomery Area
Mental Health Authority
101 Coliseum Boulevard
Montgomery, AL 36109
(334) 279-7830 (Voice)
(334) 271-2855 (TTY)

Region 4

Lee Stoutamire, Interpreter
AltaPointe Health Systems
2400 Gordon Smith Drive
Mobile, AL 36617
251-450-4353 (Voice)
251-450-4371 (TTY)



Engaging the Community: Creating a “Deaf Place”

The old schoolyard riddle about which comes first, the chicken or the egg, comes to mind when thinking about the various community building activities that have grown out of the creation of services for deaf people with mental illness. The thinking behind these activities goes something like this. To build a service delivery system there have to be qualified people. People who are deaf themselves and are otherwise qualified will be more effective than those who are not deaf. To attract qualified deaf people there has to be a community that is attractive to them. And finally, vibrant communities of deaf people provide more options for normalization of deaf people with mental illness. This line of reasoning has led to several popular events in the Montgomery area. One of these is the Deaf Coffee Night project.

Charlene Crump and former ODS staffer Liz Hill felt that the community lacked activities that would help draw deaf people together. Also, there were few, if any, activities that would provide a safe environment for new signers to mingle with and use American Sign Language. The first “Deaf Coffee Night” grew from

those discussions. Meeting at a Starbucks (where else?) a dozen sign language students and a handful of deaf people got a chance to mingle. Most of the deaf people participating were employed by DMH, either in community services or at the Bailey Deaf Unit. With only a few exceptions, Deaf Coffee night has met every first Friday since then.

What started as a small project to give sign language students a venue to practice has grown into a series of opportunities for deaf people of all walks of life to come together and reconnect. It has also fueled a resurgence of activity for the local association of the deaf. While attendance fluctuates, it is not unusual to see 50 or more people crowded into the store.

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Crump Lauded by DMH As Employee of the Quarter

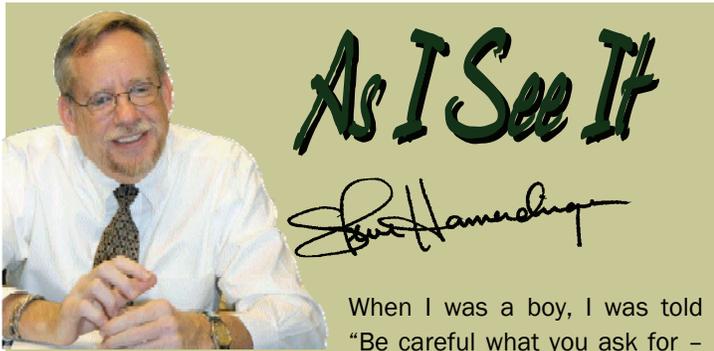
By Kristy Gates

Congratulations are in order for Charlene Crump, who was selected as the Alabama Department of Mental Health & Mental Retardation's Central Office Employee of the Quarter for FY 09, 1st quarter. Criteria for this award include compassionate service to consumers, initiative, creativity, teamwork, and above average performance. It is obvious that many of Charlene's peers recognize her as an invaluable asset to the Office of Deaf Services as she received not one, not two, but three nominations for this award.

Among the sentiments shared by those who nominated her, one said, "Charlene's first goal is to always put the service to the consumers first. She stresses to each of {us} that the quality of service we provide to the consumers we serve is the utmost priority. She is such a great example of this belief that it spreads to the people around her. She stresses and expects quality service provision and expects each of {us} to function with the same expectation and desire." Another one of the nominations said, "Charlene is always willing to go above and beyond the call of duty to do whatever it takes to get things done or make a training event happen because she is utterly devoted to her job."

Although you will never catch her "tooting her own horn," Charlene's work as the Coordinator of Communication and Interpreter Services has been recognized both nationally and internationally. We are honored to call her a part of the team, and are excited to share news of this latest recognition of her work with others.

Congratulations again, Charlene! ✍



When I was a boy, I was told "Be careful what you ask for – you might get it." This is also known as the law of unintended consequences. H.L. Mencken had another way of putting it: "The common people know what they want, and deserve to get it good and hard."

Sometimes things seem good when they happen, but turn out to be not so good. Other times, things appear to be bad, but have a way of turning out to the good. A favorite story learned during my days on the sawdust trail explores this theme.

Once upon a time an old man in China had one horse and one son. One day the horse strayed and got lost. When the old man's neighbors heard this, they went to tell the old man they were sorry about his bad luck. "How do you know it is bad luck?" he asked.

Soon thereafter the horse returned, and he brought back with him many wild horses. Now the neighbors came to congratulate the man on his good luck. "How do you know it is good luck?" he asked.

With so many horses, the son took up riding. One day, he was thrown and broke his leg. Once more, the neighbors came to the old man. Once more, they expressed sorrow at his bad luck. Once more, he asked, "How do you know it is bad luck?"

Very soon thereafter a war broke out and the military came to the old man's village to draft all the young men into the army to fight. Because of his broken leg, the old man's son did not have to go to war.

I was reading recently about a bit of case law that triggered these ruminations. An article in the National Association of the Deaf magazine, *NADmag*, (Volume 8 No. 6) talked about various court cases that NAD's legal office has been involved

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Providing Training—Making Alliances

The Office of Deaf Services has partnered with several organizations in Alabama to provide training opportunities for clinicians, interpreters, consumers and the general community. These training events allow ODS staff members to become familiar with people who might not otherwise come in contact with the Office.

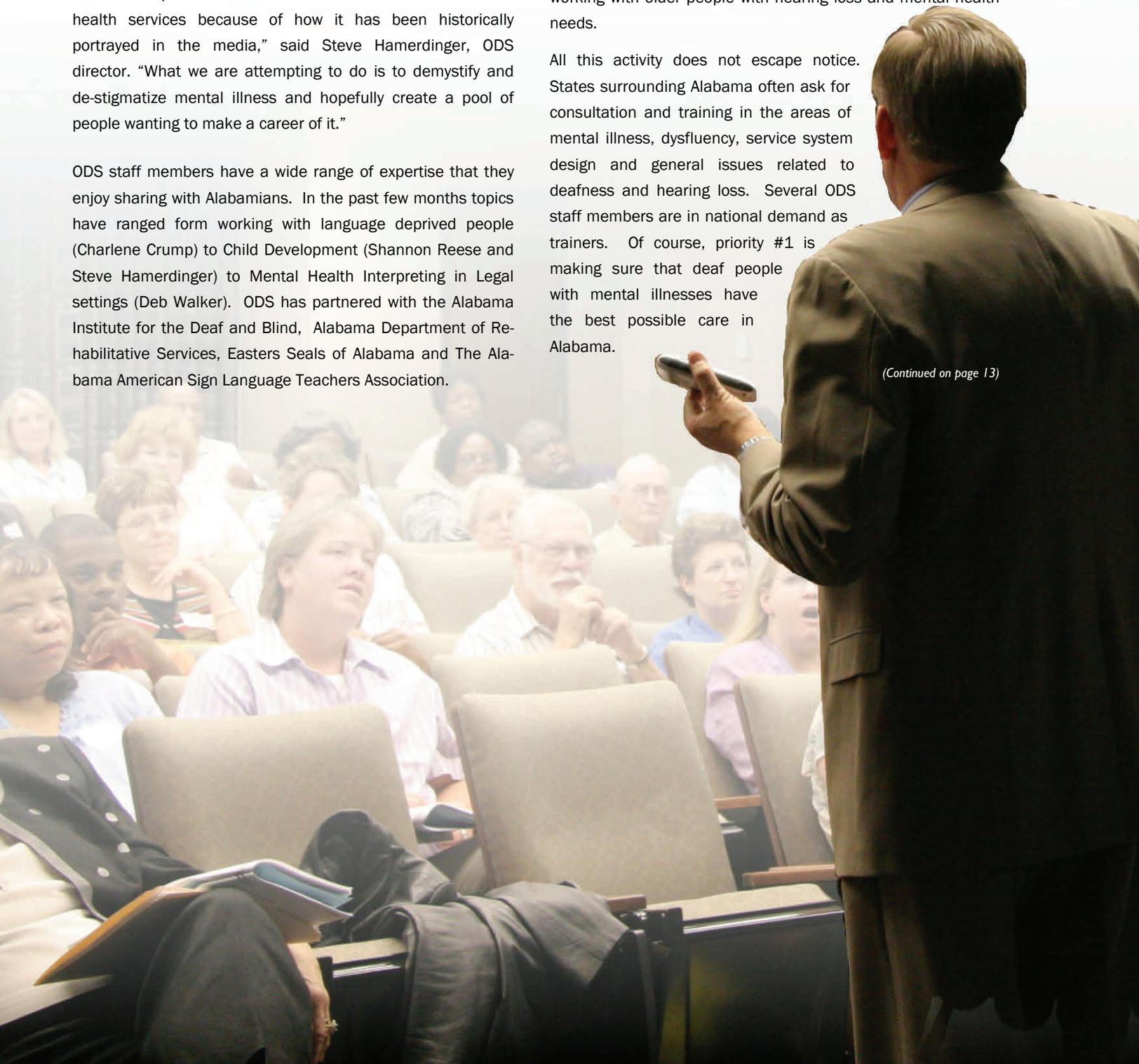
The events also are a place to introduce the idea of a career in mental health to those who may have not thought about it before. “People are often afraid of mental illness and mental health services because of how it has been historically portrayed in the media,” said Steve Hamerdinger, ODS director. “What we are attempting to do is to demystify and de-stigmatize mental illness and hopefully create a pool of people wanting to make a career of it.”

ODS staff members have a wide range of expertise that they enjoy sharing with Alabamians. In the past few months topics have ranged from working with language deprived people (Charlene Crump) to Child Development (Shannon Reese and Steve Hamerdinger) to Mental Health Interpreting in Legal settings (Deb Walker). ODS has partnered with the Alabama Institute for the Deaf and Blind, Alabama Department of Rehabilitative Services, Eastern Seals of Alabama and The Alabama American Sign Language Teachers Association.

Not all of the training events are traditional workshops. ODS is working to use distance learning technology to make it less expensive to have training events and to make attending training easier. Amy Peterson, communication specialist at the Bailey Deaf Unit used the new videoconferencing system installed by DMH at its facilities around the state to teach staff of contract programs how to use visual-gestural communication strategies. Director Hamerdinger is working with the Department of Public Health to do satellite based training on working with older people with hearing loss and mental health needs.

All this activity does not escape notice. States surrounding Alabama often ask for consultation and training in the areas of mental illness, dysfluency, service system design and general issues related to deafness and hearing loss. Several ODS staff members are in national demand as trainers. Of course, priority #1 is making sure that deaf people with mental illnesses have the best possible care in Alabama.

(Continued on page 13)





A Project of The Alabama Association of the Deaf

Deaf Community Organizes To Support BDU Patients

By Rev. Jay Croft

Several months ago I was informed that a patient in the Bailey Deaf Unit at Greil Memorial Psychiatric Hospital, Montgomery, needed a haircut. The hospital could not provide this for him. What to do? There was no hospital funding available for a special need like this. I dug into my pocket and came up with the money for the patient's haircut.

Some patients are in the Bailey Deaf Unit for a short time; others—like the patient needing a haircut—for a longer stay. When patients are discharged from the hospital, they have a place to go: family, a group home, or independent living. Often when they are discharged, they have little or no money to their name. They're on their own.

Sometimes a patient needs new clothing or a birthday gift that boosts self-esteem. The hospital cannot always provide for this, especially now that the state is under proration.

The Alabama Association of the Deaf, in cooperation with the Alabama Department of Mental Health, is establishing a non-profit organization, "Friends of the Bailey Deaf Unit." The organization will respond to requests from the BDU staff for help. Because of federal confidentiality rules, names of patients will not be revealed.

On April 24 we're kicking off this project with a special catered BBQ supper at the Alabama Department of Rehabilitation Services' new headquarters at 560 South Lawrence St., Montgomery. The evening will be highlighted by Evon Black's famous one-woman show, "Mama Cares—It Runz in the Family."

Ms. Black has thrilled audiences nationwide with her amusing and heartwarming story of growing up Deaf in rural Arkansas. Her story is not just amusing—it's hilarious! You'll laugh until you think you can't laugh any more—but then you will!

Ms. Black performs in American Sign Language in her

own special style. But even if you don't know ASL, you will surely enjoy the show, as there will be "voice-over."

Do you work in downtown Montgomery? The beautiful new ADRS headquarters buildings are convenient to your work-place. There's plenty of free parking on the ADRS lots.

We have already received a generous contribution from the Huntsville chapter of the Alabama Association of the Deaf, and from several individuals. The Alabama Department of Rehabilitation Services is making the space available for this event. Many volunteers are working together to make this event possible.

Here's your chance to make a difference in a patient's life. Psychiatric hospitalization is a difficult time for any person, and you can do your bit to help. Thank you for your support—and for your attendance on April 24. ✂

See Flyer on Page 16. For information tickets, contact Steve Hamerdinger (steve.hamerdinger@mh.alabama.gov) or Rev. Jay Croft (jlcroft@juno.com).





HOT OFF THE PRESSES : IMPORTANT ARTICLES YOU MUST READ

Kendall, Caroline J., Gutman, Virginia, Rosenheck, Robert. (2008) Mental health programs serving deaf and hard of hearing adults. JADARA 41(2):7393-350

Few studies have investigated mental health services specifically serving deaf and hard of hearing people. This study summarized data reported by 40 specialized mental health programs for deaf and hard of hearing people in the United States between 2001-2003. Deaf programs within larger mental health organizations were significantly more likely to service clients diagnosed with a psychotic disorder. These integrated programs were less likely to service consumers who are Caucasian and those who pay for services using private insurance. Integrated programs serve clients with more serious psychiatric disorders.

Twersky-Glasner, Aviva (2006) The Cultural Dissonance of Deaf Criminal Offenders: Antecedents of Linguistic and Cultural Dissonance. Journal of Knowledge and Best Practices in Juvenile Justice and Psychology, 1 (1) 11-24

Efforts to understand deaf and hard of hearing offender criminality need to take into account a number of important sociological and psychological factors that result from linguistic development delay and cultural dissonance that are unique to the deaf and hard of hearing offender population. These orientations can be usefully combined with existing theories of crime to produce a more population-appropriate criminality theory. Others, such as strain, labeling and secondary deviance, and developmental theories, are particularly promising. The purpose of the current investigation is to examine factors that derive from this theoretical orientation for their ability to explain deaf and hard of hearing criminality.

Harvey, Michael A. 2009 Preparing for battle against the hearing loss: a narrative therapy approach. JADARA 42(2) 114-127

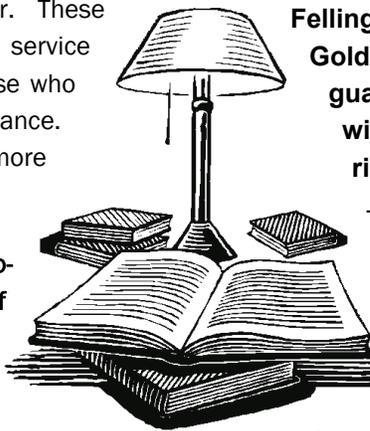
This case study describes brief psychotherapy with a 67-year-old man who had a severe to profound hearing loss. In his words he began treatment "to get my wife off my back," as his wife wanted him to be evaluated for hearing aids. The therapist used a narrative treatment approach to externalize and personify the hearing loss and to facilitate "re-membering" conversations concerning the patient's grandfather. Clinical vignette and theoretical notes are offered.

Fellingner J, Holzinger D, Beitel C, Laucht M, Goldberg DP. (2009) The impact of language skills on mental health in teenagers with hearing impairments. Acta Psychiatrica Scandinavica. Feb 5

The children had impaired language skills relative to published norms, especially marked in segregated schools. Parents rated children as having more distress than published norms. Those with superior level of spoken language had fewer peer relationship problems in mainstream education, but significantly more in segregated schools. The reverse was almost significant for those proficient in signed language.

Pugh MA, Vetere A. (2009) Lost in translation: An interpretive phenomenological analysis of mental health professionals' experiences of empathy in clinical work with an interpreter. Psychology and Psychotherapy: Theory, Research and Practice

The difficulties participants encountered in work with an interpreter highlight a need for training in cross-language empathy for interpreters and mental health professionals, and encourage the use of transcultural models of psychotherapy in work with non-English speaking service-users. Some of the difficulties associated with adopting traditional humanistic models of empathy, which tend to centralize the therapist within empathic processes, when working with interpreters are also discussed.



Troy Taps Talents of Teams

(Continued from page 3)



Amy Peterson (right) shares some pointers with Rosemary Guy, at a SLPI refresher for AIDB evaluators.

state agencies, the SLPI process will draw from the resources of ADRS, AIDB and ODS. Each evaluation team will have evaluators from the various agencies, making this a true interagency partnership.

Students wishing to major in interpreting are required to score Intermediate Plus or better. This helps make sure that 300 and 400 level courses are able to concentrate on honing and developing advanced skills rather than remedial instruction in basic ASL. ✎

NOTES AND NOTABLES

Amy Peterson, BDU Communication Specialist, has passed both the written test for Certified Deaf Interpreter and Provisional Certification by the American Sign Language Teachers Association. Congratulations to her!

Fro the third straight convention, **Charlene Crump** had a paper accepted by the Registry of Interpreters for the Deaf. She will be presenting the only mental health related workshop at its 2009 convention in Philadelphia.

Lee Stoutamire recently graduated from massage school and is now a certified massage therapist. We congratulate but still refuse to allow him to leave us!

Shannon Reese was notified that she was awarded a scholarship to the 25th National Symposium on Child Abuse taking place in Huntsville. Symposium is a multidisciplinary training conference offering numerous networking opportunities and more than 130 workshops. This was a very competitive grant and we are pleased she was able to get it.

Governor Bob Riley recently appointed **Steve Hamerdinger** was to serve on the Alabama Licensure Board for Interpreters and Transliterations. He will be the Alabama Association of the Deaf representative. Hamerdinger held a similar position in Missouri during the year 1995–2000.

BDU Hires New Deaf Care Workers

Two new Deaf Care Workers, Harriet Hollingsworth and Tiffany Stinson, have begun their duties at the Bailey Deaf Unit.

Hollingsworth moved to Montgomery from Charlotte, NC with her husband, Ben, the Region III therapist for the Office of Deaf Services. She holds an AAS degree in Geographic Information systems and has worked as a dorm parent at the Tennessee School for the Deaf. She was also an American Sign Language Lab teacher at Central Piedmont Community College in She says she enjoys working with the patients helping them with their social skills and language. She enjoys the easy communication among the staff on the unit.



An Alabama native, Stinson, has attended Gallaudet University in Washington, DC for several semesters. She hopes to return to college and get a degree in social work or other human service field. Stinson tells us that, "I love working for BDU because [it's] a place where Deaf and Hard of Hearing with a mental illness or/and co-occurring disorders can get a real help since BDU is [staffed] with Deaf Care Workers, a Deaf social worker, a Deaf psychologist, a Deaf Communication Specialist, interpreters, and nurses with basic sign languages.



A statewide hiring freeze is in effect but certain classes of employees are still being approved for hire, including direct care staff. Alabama recognizes the need to ensure that patient care is not compromised.

Deaf Care Workers are similar to mental health workers except that they must have Advanced or better scores on the Sign Language Proficiency Interview. This requirement recognizes the unique needs of BDU patients, many of whom are language dysfluent. The higher language fluency requirements means the people who are directly responsible for the care of the patients are those with strong language skills and are most likely to be able to dealt with communication challenges presented. ✎

Restructure Update: What's Happening with ODS

The restructuring of the Office of Deaf Services (described in detail in the fall issue of *Signs of Mental Health*) continues apace, according to officials at the Alabama Department of Mental Health.

At the present time Wendy Lozynsky in Huntsville and Ben Hollingsworth in Montgomery are finishing up orientation at various mental health centers through the state. The FY-2009 budget is severe and positions are frozen. This means that the planned addition of two more therapists will be on hold. As a practical matter that means there will be no clinical staff in Region II and Region VI.

Shannon Reese is now working out of Central Office in Montgomery. She has been handling calls that are related to service coordination and case-finding. Being based in Montgomery will make it easier for her to handle service coordination for the whole state.

All regional interpreter positions are now filled which has tremendously helped access. An interesting side benefit is that the more accessible staff interpreters become the more interested in direct services the centers seem to get. Steve Hamerdinger, director of the Office of Deaf Service speculated that improved quality of interpretation makes what is lost in interpreted services more evident.

The economy has created a serious budget problem for the state of Alabama and for the Department of Mental Health. As speculated in earlier stories, a hiring freeze is in effect. This means that the two unfilled therapist positions are frozen. This will have an impact on how services evolve under the new structure. Fewer staff members will have to serve larger areas. At the same time there is a reduction in fund available for travel.

One of the ways ODS is trying to be more efficient is by greater use of telepsychiatry. Recently DMH installed an up-to-date system made by Tandberg. This system is a quantum leap in resolution from the devices that are in common use by deaf consumers. Through a grant from Bristol Meyers Squibb, funds have been made available to mental health centers to purchase compatible systems. Through these systems, ODS staff can provide support to consumers throughout the state more efficiently.

To better take advantage of the Tandberg system, ODS is looking at new devices that could allow for interface with both the common video-phones in use in the Deaf Community as well as the high-end systems. Several hold promise, including the Z150 offered by CSDVRS. This particular device is also made by Tandberg. Some codec issues remain to be resolved.

ODS continues to seek new ways to serve deaf and hard of hearing consumers with mental illness. Budget challenges notwithstanding, DMH remains committed to doing everything possible to keep access available to this underserved population. 

Positions Available In Deaf Services

Deaf Services Group Homes Birmingham

MENTAL HEALTH TECHNICIANS (Birmingham)

(\$7.25/hr RELIEF POSITIONS)

QUALIFICATIONS: High School Diploma or GED. Must have near intermediate plus signing skills in American Sign Language (ASL) as measured by a recognized screening process such as the SLPI and have a thorough knowledge of Deaf Culture. Must have a valid Alabama driver's license and car insurance.

For more information about the Birmingham positions, contact:

Malissa Cates, Program Director

JBS Mental Health/Mental Retardation Authority

956 Montclair Road, Suite 108

Birmingham, AL 35213

205-591-2212 (Voice)

205-591-2216 (TTY)

mcates@bsmha.com

Deaf Group Homes (Intellectual Disabilities) Montgomery

Volunteers of America, SE seeks Direct Support Professionals (DSP) to provide supports to individuals who use Visual Communication and who also have Intellectual Disabilities. Volunteers of America seeks caring, experienced individuals to provide the following supports: grooming and hygiene skills; communication skills; socialization; meal planning and preparation; housekeeping skills and money management skills – all in an effort to increase the person receiving services ability to live more independently. DSP must be able to complete written documentation, assist in general housekeeping and meal preparation, as well as provide transportation as needed using company vehicle. Part-time and full-time employment is available and several shifts are needed. This position requires: HS Diploma/GED, valid Alabama Driver's License, good driving record, employment history, fluent in American Sign Language and must be at least 18 years of age. Volunteers of America, SE offers competitive pay, benefits, excellent retirement plan and is an EOE and Drug Free Workplace.

Apply in person: 2005 North Country Club Drive

Montgomery, AL 36106

[334] 284-9372

[334] 284-5108 Fax

Creating a Deaf Place

(Continued from page 4)

The coffee nights led to “silent suppers” at area restaurants. Meeting roughly every three months, these events draw even more people than the coffee nights. At a recent event held at the local Jason’s Deli franchise, close to 100 people showed up, essentially filling the restaurant with signing people. It can be interesting to watch “signing impaired” folks as they glance around with expressions of near-paranoia wondering if they were in a time warp. Others find the whole experience to be enriching. Katrina Nettles, the Executive Assistant to the Associate Commissioner for Mental Illness remarked that, “Attending the [Coffee Night] at Starbucks was interesting, eye-opening and gave me a different perspective of the deaf community. I was surrounded by people that were communicating and I had no clue what was being said.”

One of the not-so-unintended consequences of these activities is making people aware of Deaf people. “I think I left there with a better understanding of the challenges that a deaf person has in a hearing world. I will be attending other [Coffees]. I plan to sharpen my sign language skills and hopefully pick up a few things at the meeting,” said Nettles. No one judges people for their lack of sign language fluency—as long as an effort is made.

Such events make Montgomery a more attractive place for deaf professionals to live. Prior to 2006 there were few opportunities for deaf professionals to socialize outside of work. Having a place to go where “everyone knows your name” has an appeal. “Here, when you walk in to the coffee get-together, everyone says hello at the same time. I’ve never experienced that before,” said Harriet Hollingsworth, a deaf care worker at the Bailey Deaf Unit. The effect goes far beyond creating a “neighborhood bar,” however. It also serves as a place to educate people, share leads for possible new employees, and to debate and debunk the latest rumors from Goat Hill.

Nicole LaMont (left) shares a laugh with Johnny Sears (middle back, and Courtney Tarver (Right)

The Office of Deaf Services has long understood the need to have a highly visible presence among the deaf community. This helps promote better understanding of mental illness, the role of mental health services, and helps in identifying potential problems that might arise. It also serves to make hearing people aware that there is a population of deaf people who are fully functioning members of the community.

Differences in how deaf and hearing people negotiate awkward moments create opportunities for laughs. When 50 deaf people are crowded into Starbucks, it can be hard to get to the service counter. Deaf people are used to this, of course. They just gently push their way through to where they need to go. Hearing people are used to saying

“excuse me.” Watching hearing people talking to the back of a deaf person’s head makes for some hilarity!

Making the community a more welcoming place for both consumers who are deaf and mentally ill as well as the staff who work with them has proven to be a rewarding effort. ☞

GO: Join Deaf Coffee Night. First Friday of every month.
Starbucks 2107 Eastern Blvd.
Montgomery



As I See It

(Continued from page 5)

in. One of them related to whether a deaf person could relate in court what a hearing person said in a telephone call interpreted by relay.

In this particular case a deaf person, Michael Germano, sued a company, International Tax Advisors, for discrimination for not hiring him because he was deaf. Part of the evidence was a statement by the company over the phone that was made through a relay service. (See Docket No. 07-3914 US Court of Appeals, 7th District).

The court for the Northern District of Illinois ruled that this was inadmissible as hearsay. On appeal, this ruling was overturned and the testimony was allowed to stand. This precedence now means that a hearing person can be held accountable for statements made over the phone to a deaf person through a relay service, exactly like they would be if they made the same statement to a hearing person over the phone.

This is good, right? Well, maybe not. In person to person conversation, we can be held accountable for our statements. That's fair. But should I be held accountable for statements that are not translated accurately by a relay company? How do I prove that the statement was or was not translated accurately? What defenses do I have against being held liable for statements that are mistranslated?

In reality, I have no defense. The Federal Communications Commission declared that Communication Assistants (the old relay operators from the text relay days) were not "people" but were, in fact, "telephone lines" and they were no more culpable for errors than a copper wire running from one phone to the next would be responsible for what one person said to another. This could be tracked when there was a literal paper print out of the conversation, although technically those "TTY tapes" were the functional equivalent to a wiretap. But what about VRS? They have the exact

same legal standing as CAs did.

If I were in business, one way to minimize my exposure would be to not allow communication through a third party. In other words, if I refuse to communicate through the relay, my exposure to liability for errors in translation is zero. I could reasonably argue that email or text communication will suffice and I can control what is communicated in this medium, whereas I have no control over the message when it is interpreted.

Enter H.L. Mencken. Deaf people won a victory in getting the courts to recognize that interpreted calls are the equal of voice to voice calls. But will it be a pyrrhic victory? Will people, concerned that they will be held accountable not for

what they said but what the interpreter said, stop using the relay? Or, for that matter, interpreters in general? With all the other fears deaf people have, what with confidentiality concerns and so on, do we now need to fear being hauled to court for errors made by an interpreter in the translation of a relay call? Give us what we want good and hard, indeed.

Perhaps I am making far too much of this. I do worry about the tendency over lawyer things that should be in the realm of common sense. Do we really need labels on irons that caution us not to press clothes while we are wearing them? Could the same hyper-caution against litigation that compelled one company to put a warning label on its canned peanuts that said the can contained peanuts,

lead to warning labels on Video-Relay screens that say relay is "not responsible for errors in interpretation." (I am sure the legal beagles at Sorenson, CSDVRS, et.al, have already been working hard at this.)

Maybe it's time for people to take a deep breath and THINK. We have not yet reached the point where our system of governance has decreed us all imbeciles. (Whether or not we are headed that direction could be the topic of a lively discussion at the corner bar though.) We need to be careful that in our headlong rush toward increased accessibility we do not end up making life more inaccessible because society, fairly or not, fears litigation. **As I See it**, we should, "be careful what we ask for, we might get it." ✎

Deaf people won a victory in getting the courts to recognize that interpreted calls are the equal of voice to voice calls. But will it be a pyrrhic victory?

Providing Training—Making Alliances

(Continued from page 6)

Training for its own sake is not the reason ODS does it, though. As Hamerding explained, “In order to train others you have to have a thorough understanding of your subject matter. This pushes our staff to stay current in best practices and to broaden their knowledge base.” Increased knowledge and expertise means better services for deaf Alabamians. ✍



CURRENT QUALIFIED MENTAL HEALTH INTERPRETERS

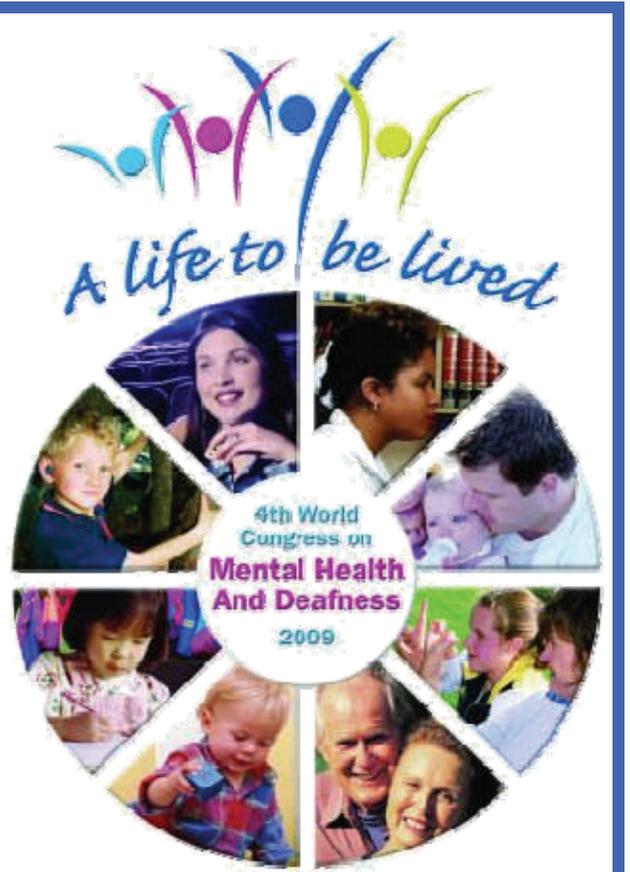
Becoming a *Qualified Mental Health Interpreter* in Alabama requires a rigorous course of study, practice, and examination that takes most people nearly a year to complete. It involves 40 hours of classroom time, 40 hours of supervised practice and a comprehensive examination covering all aspects of mental health interpreting.

Charlene Crump, Montgomery	Denise Zander, Wisconsin
Nancy Hayes, Hayden City	Brian McKenny, Montgomery
Dee Johnston, Oxford	Debra Walker, Montgomery
Lisa Gould, Mobile	Linda Lonning, Wisconsin
Dawn Marren, Huntsville	Wendy Darling, Prattville
Pat Smartt, Sterrett	Lee Stoutamire, Mobile
Frances Smallwood, Huntsville	Cindy Camp, Jacksonville
Lynn Nakamoto, Hawaii	Roz Kia, Hawaii
Jamie Garrison, Wisconsin	Vanessa Less, Wisconsin
Kathleen Lamb, Wisconsin	Dawn Ruthe, Wisconsin
Paula Van Tyle, Kansas	Joy Menges, Ohio
Judith Gilliam, Talladega	Stacy Lawrence, Florida
Sandy Peplinski, Wisconsin	

4TH WORLD CONGRESS ON MENTAL HEALTH AND DEAFNESS (Deaf Services Queensland & Deaf Children Australia)

The theme for this Mental Health and Deafness congress is “A Life To Be Lived”, focuses on deaf children and adults’ well being. It will take place in Brisbane, Australia from October 27 – 30, 2009.

For more information, please go to www.mhd2009.org





San Antonio, Texas

REGISTRATION

		Early postmarked by 1/31/09	Regular postmarked by 3/15/09	On-site
Pre-Conference Only (member)	April 15, 2009	\$100.00	\$150.00	\$200.00
Pre-Conference Only (non-member)		130.00	180.00	230.00
I-Day Registration (member)		100.00	150.00	200.00
I-Day Registration (non-member)		130.00	180.00	230.00
Conference Only (member)	April 16-19, 2009	250.00	300.00	375.00
Conference Only (non-member)		280.00	330.00	405.00
Combo (Pre-Conference and Conference – member)		300.00	350.00	450.00
Combo (Pre-Conference and Conference – non-member)		330.00	380.00	480.00

Full-time Students and Retired Professionals receive a \$75.00 discount off of Conference Only and Combo registration (proof of status required to receive discount)

Membership (does not affect current Conference registration fee) can be added to your overall registration fee:

1 year membership = \$55.00;

2 year = \$105.00;

Full-time Student/Retired Professional = \$30.00

Foreign Member = \$75.00 and

Family = \$55.00 for initial and \$20.00 for each subsequent family member.

Conference Hotel: Marriott Plaza, San Antonio
555 South Alamo Street
San Antonio, Texas

See http://www.adara.org/pages/14conf_page.shtml for more details

Pre-Conference: April 15, 2009

Conference: April 16 – 19, 2009

July 16 - 18, 2009

Holiday Inn - Research Park

Huntsville, Alabama



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2009 AAD Conference

“Are You Ready For...”

- Workshops
- Members Meeting
- Entertainment
- Pageant
- Exhibits
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For more information: web.mac.com/mlozy/aad2009

Friends of the Bailey Deaf Unit Invite You

TO SHARE AN EVENING AND BBQ WITH...

EVON BLACK

April 24, 2009

Doors open at 5:00 PM

**Alabama Department of Rehabilitation Services
Large Conference Room**

**560 South Lawrence
Montgomery, Alabama**

ADMISSION \$25

BBQ and assorted drinks will be served. Tickets on sale now. For more details or to purchase tickets contact

Jay Croft (jlcroft@juno.com) or

Steve Hamerdinger (steve.hamerdinger@mh.alabama.gov)

Friends of the Bailey Deaf Unit exists to enhance the therapeutic effectiveness of the Bailey Deaf Unit at Greil Memorial Psychiatric Hospital, Montgomery through promoting public awareness, especially in the Deaf community, of the Bailey Deaf Unit, of mental illness, and of the opportunities available for inpatients and outpatients, encouraging volunteer support from civic groups, agencies, organizations and individuals, and suitably recognizing individuals who have made exemplary efforts for the patients' welfare and rehabilitation. Contributions are welcomed.

This event is co-sponsored by:

- Friends of the Bailey Deaf unit
- Alabama Department of Mental Health
- Alabama Department of Rehabilitation Services

All proceeds will benefit the Friends of the Bailey Deaf Unit



MAMA CARES- IT RUNZ IN THE FAMILY!

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CREATED AND PERFORMED FROM
HER MEMORIES AND EXPERIENCES
OF GROWING UP DEAF WITH A
SOUTHERN COUNTRY MOTHER
FROM ARKANSAS.**