DeafBlind Interpreting:
Toward Effective Practice

2018

Copyright and Funding Information

Overview

The materials presented here on interpreting with DeafBlind people are intended for interpreters and interpreter educators, as well as for DeafBlind people seeking resources on advocacy and working with interpreters. There is also information useful to researchers, interpreter coordinators, vocational rehabilitation specialists, and others seeking to increase their knowledge in this area.

This document is available in electronic format on the DBI website at www.dbinterpreting.org. It can also be found in the DBI digital repository online at http://digitalcommons.wou.edu/dbi, and in the NCDB Library.

DeafBlind Interpreting National Training and Resource Center
Western Oregon University
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About DBI

In 2017, Western Oregon University's Regional Resource Center on Deafness (RRCD) was awarded five-year federal funding to establish a national center on DeafBlind interpreting.

With a strong commitment to evidence-based practice, the DeafBlind Interpreting National Training and Resource Center (DBI) was established. The goal of the Center is *to enhance communication access for persons who are DeafBlind by increasing the number of interpreters able to effectively interpret utilizing tactile communication and other strategies.*

The Center's corpus of work falls within two broad-based activities: (1) conduction of a training program and (2) provision of a resource center and repository for service providers, including interpreters, who seek information to better serve their constituents.

DBI is located on the Western Oregon University campus in Monmouth, 25 miles west of the Oregon School for the Deaf in the capital of Salem. For over 50 years, Western has been awarded funding to support pre-professionals in fields such as interpreter training, Deaf and hard of hearing education, and rehabilitation counseling. Grant awards from the Rehabilitation Services Administration (RSA) and the Office of Special Education Programs (OSEP) continue to support innovative educational programs and emerging research and practice in these fields.

DBI Vision
DBI envisions a world that celebrates the life and culture of DeafBlind persons, a world where DeafBlind people have influence and control over their destiny and dreams.

DBI Mission
The mission of DBI is to honor the diversity and range of communication preferences of DeafBlind individuals, or those who have a combination of vision and hearing loss, by increasing the range and number of culturally-competent and qualified interpreters and mentors.

Acknowledgements

A great many stakeholders contributed to *DeafBlind Interpreting: Toward Effective Practice,* both in content and preparation. They represent DeafBlind professionals and consumers, working Deaf and hearing interpreters, interpreter educators, vocational rehabilitation professionals, advocacy agency personnel, and others with a connection to DeafBlind individuals.

DBI gratefully acknowledges all who took the time for thoughtful engagement in the project's interviews, focus groups, and surveys. Without their active participation, this report would not have been possible. In particular, we would like to acknowledge the following individuals:

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Preface

2018
Prepared by:
Heather Holmes
CM Hall

Introduction

A cultural shift in the DeafBlind community and in DeafBlind interpreter education is emerging — a shift away from the pathological and medical view of DeafBlind-"ness" and an adoption of the cultural perspective, centered on touch as the vehicle for information, access, power, and autonomy. The DeafBlind Interpreting National Training & Resource Center shares these values and recognizes that while not all individuals who have a combination of vision and hearing loss utilize touch as their primary means of communication, there is little in the way of current interpreter education on how to prepare interpreters working with this cultural and tactile mindset that affirms DeafBlind individuals' autonomy.

By combining recent data collection regarding youth who are DeafBlind (NCDB, 2008) and previous estimates of adults (Watson & Taff-Watson, 1993), it is estimated that 50,000 DeafBlind individuals reside in the United States (NCDB, 2016). . They comprise two percent of the approximate 4,000,000 Deaf individuals living in the United States today. As a demographic group, they are often described as "low incidence" within a "low incidence" group (Deaf). Despite a low census, RSA recognizes their need for services, including qualified interpreters, as important.

DeafBlind individuals come by their life situation in many ways: present at birth as a result of genetic or congenital conditions, acquired as a result of illness or injury, or as in the case of 50% of the population, from Usher's Syndrome (American Association of the DeafBlind, 2009). A snapshot of the DeafBlind community reveals one that mirrors hearing-sighted individuals in almost every way. They are family members, professionals, leaders, followers, and representative of every race and heritage on the planet. Like their peers, they have dreams, goals and aspirations. They also bring a unique perspective on how the world can be interpreted, and a unique and varied communication style, most often grounded in touch.

The communication choices made by DeafBlind persons are varied, and guided most often by the etiology of their hearing and vision loss, personal life stories, community, and education. Historically, this population communicates utilizing a slate of options, with the most often cited being visual ASL, tactile ASL, print-on-palm, and speech-reading (American Association of the DeafBlind, 2009).

However, in growing numbers, DeafBlind individuals are now questioning the adequacy of these systems, believing they have long been ineffective (Edwards, 2014). In the early 2000s, the DeafBlind Service Center of Seattle took a deliberate look at the challenges faced by its DeafBlind consumers. They traced these challenges to a single cause: insufficient or incomplete access to communication and environmental information as a result of reliance on visually-based communication packaged in a tactile format. Clifton Langdon called out this finding in his address to the White House (Nuccio & Langdon, 2016):

Many of us know the scene where Anne Sullivan writes the word "water" on Helen Keller's hand. But what no one has asked is: Why did it take Sullivan so many tries? It wasn't because Helen Keller was DeafBlind. It was because Sullivan took a most unnatural approach.

He further notes that, historically, adaptations have been created by sighted people, and asks:

But imagine what would happen if a community of DeafBlind people began to exert natural social pressures on these adaptations? What kind of language would emerge?

In 2007, members of the DeafBlind community did push back, and a new movement was born. Referred to as protactile ASL, it is described as an overarching philosophy, a method that extends the possibilities of touch communication, direct access to information, and a paradigm shift in attitude and autonomy. An organically-grown movement, it has within one decade successfully challenged the way tactile interpreting should be done.

An interpreter's ability to provide effective tactile-based interpretation is determined by the education available to them, whether it be formally matriculated, gleaned directly from the community, or acquired on the job. A snapshot of today's educational landscape depicts interpreters with this specialization as gleaning their knowledge and skills "on the streets."

There are approximately 150 Interpreter Education Programs in the United States today; 67% confer AA/AAS degrees and 33% confer BA or higher degrees. Of these, five AA/AAS and 13 BA+ are accredited. Of the 18 accredited programs, six offer dedicated coursework in DeafBlind interpreting (Commission on Collegiate Interpreter Education, nd). Consequently, interpreters often leave their education programs with little or no skill in tactile interpreting. It is not surprising, that with limited opportunities to learn, there are few interpreters with expertise in this specialization. To increase the number of qualified interpreters, more learning opportunities must be made available to interpreters in geographic areas beyond the six current preservice programs.

It is the charge of DBI to directly address the shortage of interpreters by increasing opportunities to acquire training of scope and sequence. More specifically, DBI is charged to create, implement, and disseminate curricula that speaks to the true needs of the stakeholders, and to do so using industry-standard effective practice protocols.

Almost all educators appreciate the importance of having an accurate understanding of the competencies needed to carry out a professional task *before* they start the process of curriculum design. A necessary first step in this process is the conduction of a comprehensive needs assessment to identify the prevailing knowledge, attitudes, beliefs and skills surrounding DeafBlind interpreting, and to ascertain the competencies interpreters need in order to effectively interpret.

About This Report

The DeafBlind Interpreting National Training and Resource Center (DBI) is pleased to present *DeafBlind Interpreting: Toward Effective Practice.* This publication shares the outcomes of a comprehensive needs assessment whose purpose was to ascertain the competencies required of interpreters working with DeafBlind individuals. Conducted in 2017 by DBI staff and the Core Team, the *Needs Assessment* serves as the first step or component of the larger curriculum effort undertaken by DBI, that being the development and dissemination of a curriculum guide that includes learning objectives, activities, and source materials for use by qualified educators and trainers.

This report cannot be described as a traditional needs assessment: a survey activity where one takes a snapshot of the nation's beliefs and needs regarding a particular population. Nor is it a job analysis, though it most resembles one. Rather, this publication chronicles a study, guided by prevailing best practices, to *identify and vet the competencies and skills most needed by interpreters* to effectively engage in DeafBlind interpreting.

Needs Assessment Methodology
In alignment with effective practice industry-standard protocols, the *Needs Assessment* used four data-gathering tools: a literature review described in the format of an *Annotated Bibliography*, focus groups, surveys, and interviews.

Needs Assessment Tools and Purposes
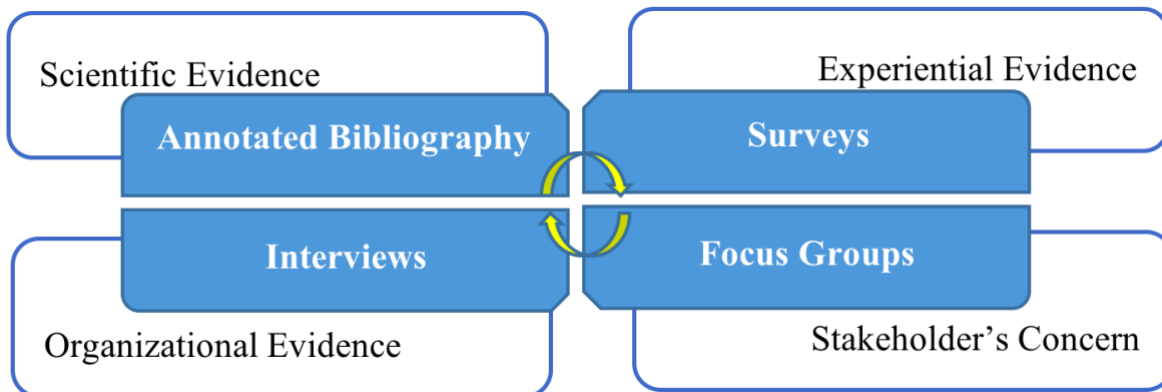
Annotated Bibliography
The process of identifying a slate of competencies most often begins with a comprehensive review of the literature. For this project, the information collected is described in the format of an *Annotated Bibliography*. This section of the publication offers a large compilation of readings reflective of current and promising practices in DeafBlind interpreting. The literature review established an initial set of competencies to assess and provided a platform from which to build the focus group, survey, and interview tools.

Baseline Survey

Often focus groups or interviews are conducted prior to the dissemination of a survey but because there is so little information available on the location, scope and abilities of DeafBlind interpreters, a *Baseline Survey* was conducted first. Its primary purpose was to canvass the US to identify as many DeafBlind interpreters as possible, and obtain an initial pulse of the overall field's *knowledge, attitudes, beliefs, and skills (KABS)*. In addition to informing the *Needs Assessment,* the *Baseline Survey* will also be used as an evaluation tool to determine if the DBI project is indeed increasing the number of interpreters qualified to work with DeafBlind individuals.

Focus Groups

Viewed as an essential component to the *Needs Assessment*, focus groups create a unique environment where participants are encouraged to interact and influence each other as they consider ideas and perspectives. Nine focus groups were conducted.

Competencies Survey

The goal of this second survey was to drill down further to distinguish the key competencies associated with this important specialization. More specifically, the *Competencies Survey* sought to distinguish the specific *knowledge, attitudes, behaviors and skills (KABS)* required by interpreters who work with DeafBlind individuals. Using *Baseline Survey* findings and the outcomes of the *Focus Groups* to design this instrument, the *Competencies Survey* was completed by 612 stakeholders.

Interviews

The final *Needs Assessment* tool employed was a series of structured qualitative *Interviews* of recognized experts in the field of DeafBlind interpreting. The purpose of this activity was to compare the KABS deemed important by practitioners who interpret on a daily basis against those of the experts who shape the field (e.g., educators, leaders, etc.).

The *Needs Assessment* was supported by the University's research arm, The Research Institute (TRI). TRI created the two online surveys and synthesized the empirical data obtained from both. TRI also reviewed the focus group and interview questions and protocols to ensure a coordinated dovetail approach to the four tools, and to safeguard the use of proper focus group and interview protocols.

Navigating This Report

Conceptually, *DeafBlind Interpreting: Toward Effective Practice* is organized within the following five informational clusters:
1. Introduction
2. Annotated Bibliography
3. Empirical Data and Key Findings
4. Domains and Competency Statements
5. Vetting Outcomes of Domains and Competencies

DeafBlind Interpreting: Toward Effective Practice is offered as a publication that can be downloaded as a single comprehensive report, or retrieved in stand-alone units or sections. Each stand-alone unit or section is as follows:

- Annotated Bibliography
- Baseline Survey
- Focus Groups and Interviews
- Competencies Survey
- Needs Assessment Key Findings and Domains and Competency Statements

Key Terms

A number of key terms are used throughout this Report. They are terms that may not be defined the same by all people. For purpose of this publication, these terms are defined below:

- *Autonomy:* refers to the freedom to make informed decisions independently without influence or coercion
- *Competency:* a specific attribute, often in the form of knowledge, skill, qualification, or capacity, required in order to complete a task sufficiently
- *Deaf:* refers to the wide spectrum of individuals who comprise the Deaf Community and identify as Deaf or DeafBlind
- *DeafBlind:* DeafBlind refers to individuals who are both deaf and blind to some degree. They are often members of cultural and political communities centered around shared identities, ranging from embracing medical models to more radical philosophies that celebrate touch and tactilehood. There are many DeafBlind organizations and many countries and state or provincial governments that offer services geared toward this population, including vocational rehabilitation services, accessibility assistant services, interpreters, and the provision of technology and other equipment to facilitate communication. DeafBlind people may speak primarily in the dominant spoken language or the dominant signed language of their regions, or variations of these, such as Braille and tactile reception and modification of a sign language. Some DeafBlind communities in recent years have begun developing their very own, wholly tactile sign languages, most notably Protactile in North America. No one knows how many DeafBlind people there are, because many become DeafBlind as adults. Traditionally, DeafBlind people are considered distinct from hearing-sighted people who experience age-related vision and hearing loss as senior citizens, which do make up an important population by themselves but often do not come together as communities or go through a journey of cultural discovery and identity (J. L. Clark, personal communication, March 26, 2018).
- *Deaf Interpreter:* refers to a Deaf or hard of hearing specialist who, in addition to providing the same services as a practitioner, has specialized abilities to understand non-English or atypical language, and incorporates gesture, mime, props, drawings, and other visual tools to facilitate communication

- *DeafBlind Interpreting:* Interpreting for DeafBlind Individuals The type and extent of the combined hearing and vision loss determines an individual's mode of communication and needs regarding visual accommodations. Individuals who are DeafBlind employ one or more of the following communication modes:
    - sign language at close visual range (less than 4 feet) and/or within a limited visual space (often a small area including and just below the signer's chin to signer's chest) 4
    - sign language at a greater visual range (4-8 feet) to accommodate those individuals with limited peripheral vision
    - sign language received at close visual range with the use of tracking [hand(s) is/are placed on the interpreter's wrists/forearms for the receiver to maintain signs within their visual range]
    - sign language received by sense of touch with one or two hands (tactile)
    - fingerspelling received by sense of touch (tactile)
    - Print-on-Palm (block letters drawn on the palm)
    - speechreading at close visual range
    - hearing with assistive listening devices
    - reading via text-based devices and services (e.g., real-time captioning connected to a large visual display or refreshable Braille output)
    - sign supported speech

  Experienced interpreters who work with DeafBlind people are knowledgeable about and sensitive to environmental factors that may significantly affect the interpreting process. Skilled DeafBlind interpreters are able to incorporate the speaker's message while also transmitting visual, auditory and environmental stimuli that contribute to the context of the interpreted message. Dependent on the DeafBlind consumer's preference, the following components should be considered and may be incorporated during to the beginning of the meeting/workshop/conference:
    - the layout of the room (position of windows, color of walls/platform background, tables, chairs, doors)
    - specific visual background (signer's shirt in contrast to skin color, high-necked collar, minimal jewelry/accessories)
    - seating positions (need for distance or proximity; logistics for teaming)
    - auditory factors (background noise; use of assistive listening devices)
    - identify who is speaking and location of the speaker
    - the speaker's emotional affect and gestures
    - unspoken actions and reactions of people in the room
    - information from handouts, PowerPoint slides, other audiovisual materials when a person enters or exits the room

  The amount of information incorporated is at the discretion of the DeafBlind consumer and also requires considerable skill and judgment on the part of the interpreter. (Registry of Interpreters for the Deaf, 2007)
- *Domain:* a specified sphere of activity or knowledge, one that a person can exert a level of control over

- *KABS:* A set of attributes that affects or influences one's ability to acquire a competency and effectively perform its tasks. It is an acronym for Knowledge, Attitudes, Behaviors, and Skills. As a model it presupposes that with knowledge, attitudes will change. With changed attitude will come changed behavior, and with changed behavior will come enhanced skill. Numerous experts in the field often define these terms as:
    - *Knowledge:* the acquaintance with facts, truths, or principles, most often acquired from study or through investigation
    - *Attitude:* a settled way of thinking or feeling about someone or something, typically one that is reflected in a person's behavior
    - *Behavior*: the way in which one acts or conducts oneself, especially toward others
    - *Skill:* the application of one's knowledge, attitudes and behaviors in a manner recognized as sufficient or greater
- *Practitioner:* refers to Deaf and hard of hearing specialists who provide interpreting, translation, and transliteration services in American Sign Language and other tactile and visual communication forms
- *Self-determination:* refers to the act whereby DeafBlind individuals have the opportunity to make choices and decisions based on their preferences, an act that allows DeafBlind individuals to be responsible for their actions and directly shape their community and their way of life
- *Stakeholders:* refers to all parties who have an interest in, concern about, or the power to impact the lives of DeafBlind individuals in some positive or negative way. Stakeholders for this project include DeafBlind individuals, vocational rehabilitation personnel, interpreter educators, interpreting practitioners and referral agencies, advocacy personnel, and family and friends
- *Support Service Provider (SSP):* A trained worker who has appropriate communication skills (typically this means at least a minimum level of fluency in sign language) and the ability to guide a blind/DeafBlind person safely as well as skill in providing information about the visual environment.) (Nuccio & Smith, 2010)

In Closing

The time and commitment given to this important aspect of evidence-based practice cannot be overstated. The DeafBlind community deserves no less than a thorough research and identification of the skills and professional competencies every interpreter should possess when providing services. In total, 1,704 survey responses were recorded, and 77 stakeholders shared their thoughts in a focus group or an interview.

What was learned during this period of discovery was considerable. We learned that, in addition to the generalist competencies, working with DeafBlind individuals demands a comfort with tactile interpreting and the added skill of providing environmental and visual information in a tactual mode. Tactile interpreting incorporates a complex set of skills that go beyond language transmission. Beyond the addition of a new vernacular, and the skills to interpret in multiple modalities, tactile interpreters engage in tasks that are co-occurring. While transmitting language, an effective tactile interpreter looks beyond the communicator to the social and physical environment and imparts the external dynamic while conveying the overt language message. They must know how to guide a DeafBlind person and incorporate ergonomic strategies to alleviate the physical properties placed on the interpreter. They must understand and know how to maximize the power of touch.

At the center and the guiding force of this emerging protactile movement and interpreter training, are DeafBlind individuals. Any curriculum and development of materials and training must be done in partnership with their leadership as the linguistic and cultural experts in this work.

It is the hope of DBI that the reader, irrespective of background, will use this resource for learning, teaching and advancing the field. We hope that the content will spur dialogue that leads to the expression of philosophical ideas, and new and bold approaches to interpreting for the DeafBlind community.

References

American Association of the DeafBlind. (2009, February 11). *How do deaf-blind people communicate?* Retrieved from http://www.aadb.org/factsheets/db_communications.html

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Commission on Collegiate Interpreter Education. (nd). *Accredited programs.* Retrieved from http://ccie-accreditation.org/accredited-programs/

National Center on Deaf-Blindness. (2017). *The 2016 national child count of children and youth who are deaf-blind*. Monmouth, OR: Author. Retrieved from http://nationaldb.org/reports/national-child-count-2016

Nuccio, J. [Jelica]. (2016, June 12). Hello everyone, here is the transcript from my White House talk [Facebook Status Update]. Retrieved from https://www.facebook.com/jelica.nuccio.9/posts/1151919454839451

Nuccio, J. & Smith, T.B. (2010). *Providing and receiving support services: Comprehensive training for deaf-blind persons and their support service providers*. Seattle, WA: DeafBlind Services Center.

Registry of Interpreters for the Deaf. (2007). *Interpreting for individuals who are deaf-blind.* Standard practice paper. Alexandria, VA: Author. Retrieved from https://www.rid.org/about-rid/about-interpreting/standard-practice-papers/

Watson, D. & Taff-Watson, M. (1993). *A model service delivery system for persons who are deaf-blind*. Fayetteville, AR: Rehabilitation Research and Training Center for Persons who are Deaf or Hard of Hearing, University of Arkansas.

Section 1: Annotated Bibliography

2017
Prepared by:
National Center on Deaf-Blindness (NCDB)

Overview

The Annotated Bibliography first began as a project of the National Task Force on DeafBlind Interpreting to help support infusing the current Interpreter Education Training Program format with DeafBlind-related content (i.e. tactile communication, guiding, and describing the environment). Because there is no standard across IEPs to offer stand-alone DeafBlind interpreting courses, content experts culled what materials had been produced over time in the field and synthesized the most salient findings into this document. Some materials may be more challenging to locate and reproduce but generally, these materials remain in existence and can be located or tracked via the DBI online repository, NCRTM or NCDB's digital archives.
As the DeafBlind community continues to mobilize, there will be more need for updating content to reflect the growing linguistic and cultural demands of this minority group and new materials will need to address this. To that end, DBI is committed to supporting dissemination efforts of any new publications, content and research.

A digital version of this document and most of the resources it describes can also be found listed in the DBI digital repository online at http://digitalcommons.wou.edu/dbi and are available from the NCDB Library.

This document is also available in electronic format on the DBI website at www.dbintepreting.org.

For additional information, access the DBI website at www.dbintepreting.org or contact DBI at dbi@wou.edu. If you have comments or recommendations for resources you think should be included in a future edition, please send them to DBI either via email or by mail to:

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Acknowledgements

Resources
In alphabetical order.

'DACTYLS' METHOD OF COMMUNICATION
Reyes, Daniel Alvarez. 2001. DBI REVIEW, No. 27, January-June 2001, pp. 4-6.
This article describes a new type of sign language developed by a DeafBlind man in Spain. His sign language combines both the Spanish manual alphabet finger signing and Spanish Sign Language (LSE), adapted for use in the palm of the hand, i.e. it uses both letters and signs in the hand. This method produces a faster speed of communication than traditional sign or manual spelling. Keys to using the signs, developing the system as well as advantages and disadvantages of the system are included.

"I DON'T DO DEAF-BLIND"
Jacobs, Rhonda. 1997, December. VIEWS, Vol. 14, No. 11, p. 1.
The purpose of this article is to recruit interpreters to become skilled in working with DeafBlind people. The shortage of DeafBlind interpreters is discussed. The author encourages interpreters to attend an American Association of the DeafBlind convention or attend a DeafBlind workshop or training opportunity to experience this type of interpreting. Also listed are eight additional ways to get started in the field.

"WHAT'S MY ROLE?": A Comparison of the Responsibilities of Interpreters, Intervenors, and Support Service Providers
Morgan, Susanne. 2001. DEAF-BLIND PERSPECTIVES, Vol. 9, No. 1, pp. 1-3.
This three-page article compares and contrasts the various roles and responsibilities of interpreters, intervenors, and support service providers. It compares each in table form in a variety of categories. Categories range from age of clients, ethics, certifications required, confidentiality issues, and professional training. Available at:
http://documents.nationaldb.org/dbp/pdf/sept01.pdf

A BRIDGE TO THE OUTSIDE WORLD
Pedersen, Bettina Kastrup. 2014. DBI REVIEW, No. 52, pp. 25-26.
This article explores the use of haptic communication with congenitally DeafBlind people. It may contribute to giving a better understanding of the outside world. This relatively new way of communicating actually has a social dimension which other tactile forms of communication may have difficulty in conveying.
http://www.deafblindinternational.org/PDF/DbI%20Review%2052.pdf

A CASE STUDY OF TACTILE LANGUAGE AND ITS POSSIBLE STRUCTURE: A Tentative Outline to Study Tactile Language Systems among Children with Congenital Deafblindness
Dammeyer, Jesper; Nielsen, Anja; Strøm, Emilie. 2015. Journal Of Communication Disorders, Deaf Studies & Hearing Aids, Vol. 3, No. 2.
This article theorizes that tactile languages may exist as unique languages (rather than just modifications of visual sign language). Through the analysis of a 1 ½ minute video of a congenitally DeafBlind boy communicating with his mother about a playground experience, the authors explored tactile linguistic features of phonology, morphology, semantics, and syntax. The linguistic features of tactile language were found to involve a potential unique and complex structure based on direction, speed, and acceleration of movements; pressure; and body position. http://dx.doi.org/10.4172/2375-4427.1000133

A DAY IN THE LIFE OF THE STAFF INTERPRETERS AT THE HELEN KELLER NATIONAL CENTER
Hecker-Cain, Jane; Rubinberg, Ilissa. 2005, December. VIEWS, Vol. 22, No. 11, pp. 35-36.
Describes the challenges of coordinating interpreting services at a center-based program that includes consumers and staff who are DeafBlind, Deaf, blind and hearing. Includes the logistics of interpreting in a variety of individual and group settings as well specific adaptive equipment and techniques for facilitating individual styles and preferences.

A DEAF-BLIND PERSPECTIVE
McGann, Richard. 2005, December. VIEWS, Vol. 22, No. 11, pp. 1, 54.
Two-page article about interpreting for consumers who are DeafBlind written by an adult who is DeafBlind. Briefly touches on the difference between interpreting for Deaf and DeafBlind consumers, and the difference between tracking and tactile interpreting.

A GLIMPSE OF OUR WORLD: Inspirational Stories by Young Deafblind People
Deafblind International Youth Network. 2016.
This booklet includes 15 one-page stories of young people with deaf-blindness from around the world. Most are accompanied by a photo.
http://dbiyn.deafblindinternational.org/Documents/A%20Glimpse%20of%20Our%20World.pdf

A GLOSSARY OF SOME COMMUNICATION METHODS USED WITH DEAF-BLIND PEOPLE
Cooper, Sheryl B. 1997, December. VIEWS, Vol. 14, No. 11, p. 6.
Contains descriptions of 13 methods of communication used by DeafBlind People. Includes: Print on Palm, Tadoma, Small Sign Language, Tactile Sign Language, Tactile Fingerspelling, FingerBraille, Alphabet Glove, Alphabet Card, Braille Alphabet Card, Tellatouch, TeleBraille and Braille Tape. Includes illustrations.

A GUIDE FOR PRESENTERS AT INTERPRETED CONFERENCES
Jacobs, Rhonda; Hammett, Richelle. 1994. DEAF-BLIND PERSPECTIVES, Vol. 1, No. 3, pp. 4-5.
Article discusses the difficulties an interpreter faces when trying to interpret for speakers at conferences. Suggestions are offered as to how the speaker can make the sign language interpreter's task easier. Available at: http://documents.nationaldb.org/dbp/pdf/may94.pdf

A GUIDEBOOK FOR EDUCATIONAL SIGN LANGUAGE INTERPRETERS: Making Accommodations for Students with Combined Vision and Hearing Loss (Deaf-Blind)
Nebraska Deaf-Blind Project. 2016.
This document provides a basic overview of educational interpreting for students with combined vision and hearing loss, including environmental accommodations, low vision interpreting, reduced peripheral fields interpreting, tactile sign language (one- and two-handed methods), tactile fingerspelling, and other communication modes.
http://documents.nationaldb.org/products/interpreter2.pdf

A PROCESS MODEL FOR DEAF-BLIND INTERPRETING
Jacobs, Rhonda. 2013, February 21. National Task Force on Deaf-Blind Interpreting and the CATIE and MARIE Centers.
This 90-minute webinar, geared toward interpreter educators and working interpreters, with or without experience working with people who are DeafBlind, will present A Process Model for DeafBlind Interpreting as published in the 2005 Journal of Interpretation, updated to include work published since 2005. Participants examine a process model of interpreting as it relates to DeafBlind interpreting, considering such elements as visual information, message analysis, contextual analysis, linguistic modifications and back-channeling. Available at:
http://www.youtube.com/watch?v=JkpykTKzwAc

A THIRD WAY: Communication Project for Adults and Elderly People with Acquired Deafblindness
Bruun, Jenna W.; Ottesen, Henrik H. 2003. 13th DbI World Conference on Deafblindness Conference Proceedings, August 5-10, 2003, Mississauga, Ontario, Canada. Canadian Deafblind and Rubella Association.
This is the text of a workshop presentation given at the 13th DbI World Conference on Deaf-Blindness. The paper describes the creation of a third way to communicate, a tool for communication based on linguistic components from sign language, tactile sign language and tactile signs.

ABOUT COMMUNICATION WITH PEOPLE WITH ACQUIRED DEAFBLINDNESS
Information Center for Acquired Deafblindness.
This translation of the Danish booklet "Om Kommunikation Med Dovblinblevne" provides practical techniques for effective communication with people who have become DeafBlind in their youth or adulthood. The term DeafBlind is defined and the ramifications of having dual sensory impairment is discussed. Topics include: person-to-person communication, sign language and manual alphabet techniques, communication through a contact person or interpreter, conducting meetings, and DeafBlind telephone equipment. The section on conducting meetings covers several aspects and details such as: interpreter accommodations, the formats of the agenda and other meeting materials, breaks, lighting and indoor arrangements, and technical aids. A meeting checklist is provided. 11 pages.

ADVERBIAL MORPHEMES IN TACTILE SIGN LANGUAGE: Deaf-Blind Interpreting

Collins, Steven D. 2014. In Robert Adam, Christopher Stone, Steven D. Collins, & Melanie Metzger (Eds.), Deaf Interpreters at Work: International Insights (pp. 117-139). Gallaudet University Press.

This chapter investigates adverbial use in tactile American Sign Language (TASL) using a linguistic case study of a conversation between two adults with Usher syndrome Type I. The participants were videotaped during a 50-minute dialogue. The study found that the signers used tactile components (such as holds, tenseness in hands, and added signs) to make up for visual nonmanual signals that convey meaning in ASL. Specific ways in which they expressed adverbials of various types are presented in tables. The author concludes that there is grammatical variation between visual and tactile ASL.

AN INTERVIEW ON DEAF-BLIND INTERPRETING WITH CHAD METCALF

Jacobs, Rhonda. 2008, February. VIEWS, Vol. 25, No. 2, pp. 1, 15, 16.
This article is an interview of a DeafBlind person and his use of interpreters.

AN OPEN LETTER TO OUR PARENTS: What We Wish You Had Known

Collins, Myra; Delgadillo, David; Frawley, Matt; Kinney, Ginger; Lugo, Joey; Lundgren, Jean; Price, Kathy; Rybarski, Shirley. 1994, September 1. USHER FAMILY SUPPORT.

This letter, composed by a group of people with Usher syndrome who meet weekly at the Helen Keller National Center, advises parents to inform their children with Usher syndrome about their disability, what it is called, that it is genetic, and that it can get progressively worse. The stress and embarrassment produced by symptoms of their condition in the teenage years (night blindness, clumsiness, difficulty in poor lighting) and the insensitivity of teachers unknowledgeable about the condition is discussed. None of the contributors received special services before age 17 and they feel that orientation and mobility training should start earlier with parents' support. They advise parents of DeafBlind children to learn and use sign language and to ensure that their children learn tactual sign, sign tracking techniques, and Braille while they are still in school and before they actually need it. They also discuss the emotional ramifications of diagnosis and worsening vision: anger, frustration, depression (sometimes leading to suicidal thoughts), and stress. They emphasize that it is important that parents learn how their children feel and earn their trust by being honest with them about their condition. Available in Spanish. 3 pages.

AN OPEN LETTER TO THE DEAF COMMUNITY: We Have Usher Syndrome

Chiocciola, Theona; Harrison, Syble; Kesner, Beverly; Lejeune, Janice; Stender, Andrew; Tunison, Winifred; Herrada, Rosenda; Levine, Frank; Lugo, Joey. 1994. USHER FAMILY SUPPORT, Vol. 1, No. 4, pp. 4, 9-11.

A group of people with Usher syndrome describe their feelings concerning the Deaf community's lack of understanding about the loss of sight experienced by those with Usher. They suggest ways that members of the Deaf community could interact with people who have Usher syndrome.

ASSESSMENT OF SERVICE-LEARNING IN THE DEAF-BLIND COMMUNITY

Shaw, Sherry; Jolley, Carolyn S. 2007. JOURNAL OF EXPERIENTIAL EDUCATION, Vol. 30, No. 2, pp. 134-152.

The concurrent conditions of deafness and blindness present a set of unique needs within a community that highly values independence and autonomy. This project assesses the service-learning initiative in a post-secondary Interpreter Education Program (IEP) in which students learn via civic engagement with the DeafBlind community to employ concepts and skills acquired from coursework. In 2005, several years after implementing service-learning in the Interpreting for Individuals Who Are Deaf-Blind course, the program assessed project efficacy through reflective journal analysis and stakeholder interviews. Results indicated dominant themes around DeafBlind consumer empowerment, personal attitudes, coping strategies, and application of experiences to specific topics addressed in class. Outcomes of this assessment are being used to revise the course so as to align objectives more closely with needs of students and community entities that serve persons who are DeafBlind.

ASSUME NOTHING: Deafblindness - An Introduction

West Australian Deafblind Association. 1999. All Round Vision. 22 min.

Demonstrates and describes a variety of methods and techniques for communicating and interacting with people who are DeafBlind. Introduces six clients of the WA Deafblind Association ranging from the very young to adults. Presents issues in the daily lives of these individuals, including use of touch cues and signs, technology, tactile interpreting, and career choices. Open captioned. Available from Senses Foundation, Inc., 6th Avenue and Whatley Crescent, PO Box 14, Maylands, Western Australia 6931. Phone: (61) 08 9272 1122. Fax: (61) 08 9272 6600. E-mail: db@senses.asn.au

AT THEIR FINGERTIPS

TV Sea.

An 18-minute video portraying the views of people who live with Usher syndrome. It describes the difficulties and adjustment associated with becoming blind while deaf. Four people are interviewed and tell (with the assistance of interpreters) what life is like for them.

AUTONOMY AND LINGUISTIC STATUS OF NONSPEECH LANGUAGE FORMS

Teodorsson, S. T. 1980, March. Journal of Psycholinguistic Research, Vol. 9, No. 2, pp. 121-145.

Nonspeech language forms, above all sign language and writing, are discussed with respect to phylogenesis, ontogenesis, and acquisition as well as with respect to neurophysiological and psycholinguistic processes. Speech has not been demonstrated to be phylogenetically or ontogenetically prior to gestural expression. Especially the evidence of the linguistic ability of Deaf and DeafBlind people demonstrates that the various expression forms (delological forms) of language are neurophysiologically and psycholinguistically parallel. A terminology is proposed for the linguistic description of these forms.

BEING IN TOUCH: Communication and Other Issues in the Lives of People Who Are Deaf-Blind
Atwood, Alan A.; Clarkson, John Dennis; Laba, Charlene R. 1994. Gallaudet University.
This book is aimed at interpreters, teachers, and other professionals who work with DeafBlind people. It provides basic information about deaf-blindness and devotes a large section to interpreting. The appendices cover organizations, agencies, and schools serving DeafBlind people; training for teachers and interpreters; manual and braille alphabets; characteristics of vision loss; and recommendations for those looking for more information. 80 pages.

BLINDNESS AND OCCUPATION: Personal Observations and Reflections
Chaplin, Rikki. 2016. In Pamela Block, Devva Kasnitz, Akemi Nishida, & Nick Pollard (Eds.), Occupying Disability: Critical Approaches to Community, Justice, and Decolonizing Disability (pp. 319-329). Springer.
Chaplin, who is DeafBlind due to Norrie disease, discusses his perspective on occupation, dividing it into three layers: adaptive learning, contributing and providing, and advocacy and education. He describes his own experiences in these areas, focusing particularly on his advocacy work with Blind Citizens Australia and his adjustment to hearing loss. He also touches on emotional stress and its effect on people's ability to engage in their occupations.

BRIDGING THE GAP BETWEEN DEAFBLIND MINDS: Interactional and Social Foundations of Intention Attribution in the Seattle DeafBlind Community
Edwards, Terra. 2015. FRONTIERS IN PSYCHOLOGY, Vol. 6, Article 1497.
This article is concerned with the linguistics of Tactile American Sign Language (TASL). It analyzes some of the social and interactional mechanisms that constrain pragmatic acts of intention attribution among DeafBlind people in Seattle, Washington. Drawing on analyses of video-recorded interactions, notes from fieldwork, and more than 15 years of involvement in the Seattle DeafBlind community, the author argues that under the influence of the recent "pro-tactile" movement, DeafBlind people are generating new and reciprocal modes of access to their environment, and this process is aligning language with context in novel ways. She discusses two mechanisms that can account for this process: embedding in the social field and deictic integration. http://dx.doi.org/10.3389/fpsyg.2015.01497

BRINGING THEATER TO LIFE FOR THE DEAF, BLIND: College Program Uses Tactile Interpreters
De Jong, Lynda. 1999. DEAF-BLIND AMERICAN, Vol. 37, No. 3, pp. 15-17.
An article describing a college program that uses tactile interpreters for DeafBlind theater-goers in the Boston area. In addition to the interpreting, DeafBlind members of the audience get the opportunity to touch the stage props and physically feel a singer's notes as she sings, prior to the play starting.

CAN I REALLY DO IT?
Girma, Haben. 2014. TALKING SENSE, Vol. 59, No. 1, pp. 34-35.
This article is by Haben Girma, lawyer and disability rights advocate, a graduate of Harvard Law School, and the first DeafBlind student ever to do so. She describes it as a triumph of self-confidence over doubt. https://habengirma.com/

CHALLENGES IN DEAF-BLIND INTERPRETING: Then and Now

Jolley, Carolyn. 1997, December. VIEWS, Vol. 14, No. 11, p. 16.

This article describes the growth in the field of interpreting services for DeafBlind people. Increased demands in an increasing array of settings have created the need to use new skills. Flexibility is necessary to provide a broad range of services to meet the unique and diverse communication needs of individuals who are DeafBlind.

CO-FORMING REAL SPACE BLENDS IN TACTILE SIGNED LANGUAGE DIALOGUES

Mesch, Johanna; Raanes, Eli; Ferrara, Lindsay. 2015. COGNITIVE LINGUISTICS, Vol. 26, No. 2, pp. 261-287.

This article reports on a linguistic study examining the use of real space blending in the tactile signed languages of Norwegian and Swedish signers who are both deaf and blind. Tactile signed languages are typically produced by interactants in contact with each other's hands while signing. Of particular interest to this study are utterances which not only consist of the signer producing signs with his or her own hands (or other body parts), but which also recruit the other interactant's hands (or another body part). These utterances, although perhaps less frequent, are co-constructed, in a very real sense, and they illustrate meaning construction during emerging, embodied discourse. Here, we analyze several examples of these types of utterances from a cognitive linguistic and cognitive semiotic perspective to explore how interactants prompt meaning construction through touch and the involvement of each other's bodies during a particular type of co-regulation.

COMMUNICATING WITH YOUR DEAFBLIND CUSTOMERS

Sense. http://www.sense.org.uk

This three-page article describes who DeafBlind people are, how to tell if someone is DeafBlind, and how to communicate with someone who is DeafBlind. Describes various methods of communication including fingerspelling and using the phone. Provides information on how to assist someone who is DeafBlind to get around in the community and how to ensure they are safe and healthy. Available at: http://www.sense.org.uk/content/communicating-your-deafblind-customers

COMMUNICATION FACILITATORS (CFs)

granda, aj. 2007, April-June. THE DEAF-BLIND AMERICAN, Vol. 46, No. 2, pp. 27-28.

This brief article describes Communication Facilitators (CFs). CFs relay visual information from video phone calls to DeafBlind individuals using tactile or close vision sign. The Deaf-Blind Service Center (DBSC) in Seattle offers DeafBlind people the opportunity to use DBSC's video phone to make Video Relay Service (VRS) calls or a direct call using one of DBSC's CFs. Publisher's web site: http://www.aadb.org/

COMMUNICATION GUIDE SUPPORT FOR WESTERN AUSTRAILIANS WITH DEAFBLINDNESS: A PILOT PROJECT [Thesis]
Wittorff, Matthew G. 2014.
This study measured the effects on ten people who are DeafBlind and received support over a six month period from a 'communication guide' who received training in DeafBlind issues, sighted guide and DeafBlind communication. Participants completed pre-post quantitative measures and a semi-structured interview at the end of the intervention. The qualitative and quantitative data indicated improvement in quality of life of participants.
https://espace.curtin.edu.au/handle/20.500.11937/1896

COMMUNICATION SERVICES WITH DEAFBLIND PEOPLE IN MIND: Some Perspectives from the USA
Guest, Mary. 1995. TALKING SENSE, Vol. 41, No.1, pp. 16-17.
Guest briefly presents the main points of a talk given by interpreters Susan Brooks and Rita Jo Scarcella at HKNC.She notes the increase in the need for and the availability of training of interpreters for people who are Deaf or DeafBlind. The article includes a list of suggested criteria for any service agency setting up a communications and interpreting service.

COMMUNICATION: Reaction
Collins, Steven. 1992. In J. Reiman and P. Johnson (Eds.), Proceedings of the National Symposium on Children and Youth who are Deaf-Blind. Tysons Corner, VA, December 1992.
Discusses the need for DeafBlind people to be exposed to their natural language, American Sign Language. Also talks about his belief that parents and family members of people who are DeafBlind must build a rapport with, and interact with, members of the DeafBlind community.

COMMUNITY COMMITMENT TO NURTURING DEAF-BLIND INTERPRETERS
Galeota, Marthalee. 1997, December. VIEWS, Vol. 14, No. 11, p. 22.
This article outlines three programs available in the Seattle area for DeafBlind people and interpreters. The first is a mentoring program offered through the DeafBlind Service Center in Seattle. The second is a five-credit course on DeafBlind Interpreting that has been added as a required course for all interpreting students. This class is now offered each year during the fall quarter and is co-taught by a DeafBlind person and an interpreter. The third offering is the week-long retreat hosted by Seattle Lighthouse for Deaf-Blind people. It is planned, lead and directed by DeafBlind people.

CONFERENCE REPORTS: How Do We Communicate (with Assistive Technology)? Let Me Count the Ways
Kendrick, Deborah. 2000, November. ACCESSWORLD, Vol. 1, No. 6, pp. 22-26.
This article describes the adaptive technology, interpreters, and other communication techniques that were used at the national conference of the American Association of DeafBlind. Describes the various methods of communication that were used in order to effectively communicate with all participants at the conference.

CORTICAL PROCESSING OF TACTILE LANGUAGE IN A POSTLINGUALLY DEAF-BLIND SUBJECT

Osaki, Yasuhiro, et al. 2004. NEUROREPORT, Vol. 15, No. 2, pp. 287-291.

This scientific article reports the results of a small study comparing neural processes activated in tactile communication. The subjects of the study were one individual who was DeafBlind, and six individuals who had no hearing or vision loss. The authors of this study identify the specific areas of the brain activated through tactile communication, and report that these areas differ from the areas activated by auditory reception of language.

CUEMMUNICATION: Beginning Communication with People Who are Deafblind

Barrey Grassick, Sharon. 1998. DBL REVIEW, January-June 1998, p. 8.

This article presents CUEmmunication or Touch-Cue Communication, a system for communicating with individuals who are DeafBlind. These guidelines are especially designed for people who are starting work on communication for the first time. The technique provides meaningful information through a combination of approach, tangible object cues, touch cues, and touch signs/gestures. It is explained in a 10-step approach and can be adapted to use with individuals of all ages.

DEAF-BLIND COMMUNICATION AND COMMUNITY Getting Involved: A Conversation

Smith, Theresa. 1993.

This 90-minute video offers two presentations of a 45-minute conversation with Pat Cave and Janice Adams, two DeafBlind individuals. Moderated by Theresa Smith, this video presents a discussion of topics such as general perceptions and experiences of DeafBlind adults and their communication frustrations and needs. In addition, the two interpreters, one who is Deaf and the other who is hearing, share some of their experiences and perceptions. The first portion of this video is a full-screen, edited version of the conversation. The second portion uses special digital effects to present all five individuals on screen at the same time. Available from Sign Media Inc. for $69.95 ($115.95 when purchased with Overview and Introduction). Phone: 800-475-4756. Publisher's web site: http://www.signmedia.com/

DEAF-BLIND COMMUNICATION AND COMMUNITY Overview and Introduction

Smith, Theresa. 1993.

This 40-minute open-captioned video features Theresa Smith discussing a number of topics that provide a glimpse into the multi-faceted DeafBlind community. Among topics discussed are a definition and description of the community, individual communicative differences and preferences, becoming involved in the community, and setting limits. This resource also makes use of video footage to illustrate guiding and communication preferences. Available from Sign Media Inc. for $59.95 ($115.95 when purchased with Getting Involved: A Conversation). Phone: 800-475-4756. Publisher's web site: http://www.signmedia.com/

DEAF-BLIND COMMUNITY: In Touch

Neidermaier, Jan (Trans.) 1993, September. NAT-CENT NEWS, Vol. 24, No. 1, pp. 20-29.

This is an interview with two members of the DeafBlind community in which they share their perceptions of their lives and experiences working with interpreters.

DEAF-BLIND INTERPRETING

American Association of the DeafBlind. 2007, April-June. THE DEAF-BLIND AMERICAN, Vol. 46, No. 2.
This special issue focuses on interpreting for individuals who are DeafBlind. Publisher's web site: http://www.aadb.org/

DEAF-BLIND INTERPRETING

McNamara, Jamie. 1997, December. VIEWS, Vol. 14, No. 11, p. 10.
The growth of the number of DeafBlind people and the thriving DeafBlind community feeds the demand for interpreters who are skilled with a variety of communication preferences, sensitive to cultural issues, and open to adapt to diverse needs. Interpreters are encouraged to get involved with the local/state DeafBlind organization to gain valuable skills and knowledge. Specific information about volunteering at the national convention of American Association of the DeafBlind is given.

DEAF-BLIND INTERPRETING: Interpreters' Use of Negation in Tactile American Sign Language

Frankel, Mindy A. 2002. SIGN LANGUAGE STUDIES, Vol. 2, No. 2, pp. 169-180.
This article describes a study performed to document prevalent signs used during the interpreting process, specifically relating to negation in tactile sign language. The project focused on American Sign Language (ASL) to tactile ASL only. The author intended to document specific signs that pertain to the way Deaf interpreters express negation in DeafBlind interpreting. The results of this research are intended to help achieve greater understanding of what seasoned interpreters are doing in the DeafBlind field today.

DEAF-BLIND INTERPRETING: Many Paths on the Road

National Task Force on Deaf-Blind Interpreting. 2008, February. VIEWS, Vol. 25, No. 2, pp. 11-13.
This article presents a list of some of the opportunities for interpreters to expand their skills around interpreting for DeafBlind people. The task force is seeking to gather and compile lists of all available training, volunteer and educational resources and opportunities. Standardprint http://deafblindinterpreting.org/docs/ManyPathsOnTheRoad.pdf, large print http://deafblindinterpreting.org/docs/ManyPathsOnTheRoad-LargePrint.pdf and Word doc available on http://deafblindinterpreting.org/documents/.

DEAF-BLIND INTERPRETING: Settings, Spectrums and Such

Morgan, Susanne; Olsen, Debbie. 2006, February. VIEWS, Vol. 23, No. 2, pp. 30-31.
In this two-page article, the authors suggest that the field of interpreting broaden their view to the full spectrum of users who wish to access their services which includes DeafBlind interpreting.

DEAF-BLIND INTERPRETING - INTERNATIONAL STYLE
Gregg, Carol. 1997, December. VIEWS, Vol. 14, No. 11, p. 13.
Describes the experiences of an American interpreter during an international conference for people who are DeafBlind held in Columbia, South America.

DEAF-BLIND INTERPRETING 101
Jacobs, Rhonda. 1997, December. VIEWS, Vol. 14, No. 11, p. 8.
Provides basic guidelines and points to keep in mind when interpreting with a DeafBlind person. Includes information about: vision and use of space, clothing, background, lighting, pacing, identifying, visual environment, language use and fatigue.

DEAF-BLIND INTERPRETING WORKBOOK: Student Readings and Worksheets, 2nd Edition
Washington State Deaf-Blind Citizens, Inc. 2005.
This workbook is an updated version of the original 2000 book. It includes information designed to help more people become prepared and have confidence in their ability to work with DeafBlind individuals. The workbook is divided into 12 units focused on communication techniques, interpreting environments, considerations for types of vision loss, hearing loss or limited language capacities, tactile interpreting, code of ethics, DeafBlind culture, and adaptive equipment. It is intended as a supplement to classroom and community discovery. 101 pages. Available from Washington State Deaf-Blind Citizens. Publisher's web site: http://www.wsdbc.org

DEAF-BLINDNESS: An Emerging Culture?
Macdonald, Roderick 1989. The Deaf Way, paper presented July 11, 1989.
This paper traces the emergence of DeafBlind people through education, employment and social union into a modern community and culture. It takes note of individual accomplishments as well as the achievements of organizations for the DeafBlind. The article notes several characteristics unique to the DeafBlind culture: touch, group communication, dependence on interpreters, social mores imposed by deaf-blindness, games, class barriers, reduced general knowledge, economics, and language. 17 pages.

DEAFBLIND BUSHWALKERS IN WESTERN AUSTRALIA
Willis, Angela. 2015. DBI REVIEW, No. 54, pp. 13-17.
This article talks about six bushwalkers with Usher syndrome in Australia who embarked on hiking trips with sighted guide volunteers. Questionnaires and interviews afterwards assessed their physical, mental, and emotional health.
http://www.deafblindinternational.org/PDF/DbI%20Review%2054.pdf

DEAF-BLIND CONNECTIONS

Jacobs, Rhonda. 2008, July. VIEWS, Vol. 25, No. 7, pp. 44-45.

This inaugural column of "Deaf-Blind Connections" about DeafBlind interpreting and the DeafBlind community explains why such a column is important for interpreters by using the concept of contact in improvisational dance as a metaphor. Contact is a much larger and all-encompassing concept than touch because it implies communication, a give and take with another person at a given moment in time. Information about resources for interpreters and news from the National Task Force on Deaf-Blind Interpreting is also included.

DEAF-BLIND CONNECTIONS: Deaf-Blind Interpreting in Court

Jacobs, Rhonda. 2009. VIEWS, Vol. 26, No. 1, pp. 46-47, 49.

Outlines what interpreters need to know when interpreting in court for DeafBlind persons. Topics include a discussion of the types of expertise that interpreters need (DeafBlind vs. legal), how to prepare for interpreting in court, how to prepare the court (e.g., materials that should be sent in advance to an attorney or court clerk), how to request and select interpreters who meet the needs of a specific DeafBlind individual, meeting in advance with court personnel, and preparing the DeafBlind consumer.

DEAF-BLIND CONNECTIONS: Interpreting as Mobius Strip

Jacobs, Rhonda. 2008. VIEWS, Vol. 25, No. 8, pp. 44-45.

A Mobius strip is a continuous loop of ribbon such that if you follow your finger along one side, you will end up on the other side and then back again to where you originally started. In this edition of the column "Deaf-Blind Connections," the author uses a Mobius strip as a metaphor to explore the interplay of factors that make up DeafBlind interpreting. These factors include the skills needed to do DeafBlind interpreting, but also factors related to human dynamics such as interpersonal demands (the interactions of individuals present in the interpreting situation) and intrapersonal demands (psychological and physiological factors within the interpreter that have an effect on the interpreting event).

DEAF-BLIND CONNECTIONS: "May I Pet the Dog?"

Jacobs, Rhonda. 2009. VIEWS, Vol. 26, No. 2, pp. 45-46.

This edition of the column "Deaf-Blind Connections" lists 20 tips for interpreters to use when working with DeafBlind people who have guide dogs. They are points of etiquette and protocol that, when known and observed, can allow the DeafBlind person, the interpreter, and the guide dog to each do their job as part of a team.

DEAF-BLIND CONNECTIONS: Report from the National Task Force on Deaf-Blind Interpreting Face-to-Face Meeting
Jacobs, Rhonda. 2009. VIEWS, Vol. 26, No. 4, pp. 44-45.
This is a report of a meeting of the National Task Force on Deaf-Blind Interpreting, held July 31-August 1, 2009 in Philadelphia. The purpose was to identify goals and activities for the current year. A facilitated discussion resulted in identifying the following items as most salient and suitable to the mission and work scope of the task force: (1) infusion (having DeafBlind people included as part of the spectrum of consumers) versus specialized training; (2) faculty not having expertise; (3) outdated resources; (4) how current interpreters who work with DeafBlind people are being trained; (5) viewing the paradigm of DeafBlind interpreting as a setting rather than a special topic; and (6) further training of faculty, staff, and instructors.

DEAFBLIND SELF-ADVOCACY: Reach Out and Touch Someone
Pellerin, René. 2014. VIEWS, Vol. 31, No. 2, p. 13.
This brief article emphasizes the importance of self-advocacy in the DeafBlind community and mentions several examples in different parts of the country.
https://drive.google.com/file/d/0B3DKvZMflFLdNGNrX3ZVYmVDYmc/view

DEFINITIONS OF ALTERNATIVE COMMUNICATION STYLES WITH DEAF-BLIND PEOPLE
Devich, Julie. 1997, December. VIEWS, Vol. 14, No. 11, p. 15.
This one-page article examines several styles of communication used by DeafBlind people. When interpreting for a DeafBlind person it is necessary to match their unique communication style with an accurate form of interpreting. Some issues to consider are knowing the field of available vision, knowing if the consumer is right- or left-handed, and being able to use devices such as microphones or a TTY.

DEICTIC POINTS IN THE VISUAL-GESTURAL AND TACTILE-GESTURAL MODALITIES
Quinto-Pozos, David. 2002. In Richard P. Meier, Kearsy Cormier, & David Quinto-Pozos (Eds.), Modality and Structure in Signed and Spoken Languages (pp. 442-467). Cambridge University Press.
This book chapter begins by reviewing the similarities and differences in signed language between blind and sighted signers and then describes a study that examined the use of deictic points in narratives produced by two DeafBlind adults as compared to their use in two deaf-sighted adults. Non-manual signals (e.g., eyebrow shifts, head and torso movement, and eye gaze) are integral to sign language as it is used by deaf-sighted signers. This study found that sign language production by DeafBlind individuals differs from that of sighted Deaf individuals in that DeafBlind signers do not use non-manual signs extensively. Additionally, sighted Deaf signers utilize deictic points for referential purposes while DeafBlind signers use other strategies to accomplish the same task. The ability to perceive eye gaze appears to be a crucial component in the realization of deictic points for referential purposes.

DEPRIVATION OF INFORMATION
O'Malley, Drena. No date. Deafblind International.
Describes the causes of deprivation of information for DeafBlind people and provides suggestions for interpreters and communication partners. Causes include an inability to assimilate incidental information (information gained by looking around a room or by listening while uninvolved in a situation), censorship (e.g., when interpreters or family members consciously or subconsciously censor information due to lack of skills or because they think the information will be unpalatable or politically incorrect), inconsistency in the use of communication forms. All of these things may lead to relationship difficulties, learning stagnation, and withdrawal. Solutions include improved training for sign language interpreters, development of paraphrasing skills, more recognition of the separate and unique needs of DeafBlind people, and recognition of DeafBlind culture. 4 pages.

DEVELOPMENT OF TRAINING FOR DEAF INTERPRETERS TO WORK WITH DEAF VISUALLY IMPAIRED PEOPLE
Reed, Sarah. 2003. In 13th DbI World Conference on Deafblindness Conference Proceedings, August 5-10, 2003, Mississauga, Ontario, Canada. Canadian Deafblind and Rubella Association.
This is the text of a workshop presentation given at the 13th DbI World Conference on Deaf-Blindness. The paper describes the use of Deaf interpreters to work with Deaf visually impaired people.

DRESSED TO DISTRESS?
Potterveld, Tara; Lambert, Marylouise. 2001. SEE/HEAR, Vol. 6, No. 1, pp. 9-10.
This article discusses the need for interpreters to be more aware of the possibility that the Deaf client may also have low vision needs. Discusses the need for interpreters to wear clothing that contrasts with their skin color. Good lighting and the interpreter's utilization of smaller signing space may also be of assistance to the limited vision client. The article includes additional guidelines for interpreting for DeafBlind people. Available in Spanish. Available at: http://www.tsbvi.edu/seehear/winter01/dressed.htm

EFFECTIVE USE OF INTERPRETERS IN GENERAL PHYSICAL EDUCATION
Best, Carah; Lieberman, Lauren; Arndt, Katrina. 2002, October. JOPERD, Vol. 73, No. 8, pp. 45-50.
This article discusses the use of interpreters in physical education classes. It provides teachers with ways to maximize their collaboration with educational interpreters and, as a result, improve communication with, and understanding for, their Deaf and DeafBlind students. Discusses the psychomotor abilities of Deaf children, communication responsibilities, and qualities of a good interpreter.

EMPOWERING PEOPLE EXPERIENCING USHER SYNDROME AS PARTICIPANTS IN RESEARCH

Evans, Michelle. 2017. BRITISH JOURNAL OF SOCIAL WORK.

Engaging people from marginalized groups such as the DeafBlind and Usher communities to participate in research has historically proved challenging, mainly due to communication differences between participants and researcher. This British article discusses the use of an approach called "Multiple Sensory Communication and Interview Methods" (MSCIM) during a qualitative research study involving 20 adults with Usher syndrome. Communication and interview methods were participant-led. Communication methods included clear speech, visual frame British Sign Language (BSL), hands-on BSL, DeafBlind manual, and written communication. Participants were given the choice to be interviewed face to face, over the telephone, via Skype (video or no video), or via email. The approach led to a measure of unexpected equalizing between the researched and the researcher and explored how empowering individuals from marginalized groups as active participants contributes to inclusivity and promotes trustworthiness in research.

FACTORS ASSOCIATED WITH THE SUCCESSFUL VOCATIONAL REHABILITATION OF INDIVIDUALS WITH USHER SYNDROME: A Qualitative Study [Dissertation]

Watters-Miles, Constance. 2014.

This dissertation investigates the remembered lived experiences of six individuals who were diagnosed with Usher syndrome, the effect that the progressive condition had upon their lives, and their experiences with vocational rehabilitation. The participants recalled details of their own reaction to the diagnoses as well as the reactions of their parents. Themes were identified in their responses that included independent dependence, Usher support, parental reaction, lowered expectations, hope, and ongoing change. The participants, three men and three women, reported periods of adjustment and sadness as well as hopes for their future, career accomplishments, and social interactions. http://hdl.handle.net/10150/338960

FASTEN SEATBELTS: A Guided Tour of the Research on Deafblind Communication in 45 Minutes

Mortensen, Ole E. 1999. Plenary presentation at the International Symposium on Development and Innovations in Interpreting for Deafblind People, Netherlands, June 1999.

A plenary presentation at the International Symposium on Development and Innovations in Interpreting for Deafblind People, Netherlands, June 1999 giving an overview of the research that has taken place regarding communication and the DeafBlind population. Reviews communication methods such as ASL, tactile ASL, fingerspelling, computer recognition, Tadoma, and communication speed and accuracy of each. Text available at: http://web.media.mit.edu/~anjchang/COMTOUCH/compres.htm

FUNCTIONAL IMPLICATIONS & ENVIRONMENTAL MODIFICATIONS WITH STUDENTS WHO HAVE USHER SYNDROME
Jordan, Beth. 2000, 6.
This is a list of tips for teachers, interpreters, students with deafblindness, family members, classmates, and members of the community to take into consideration in their relationships with DeafBlind people. Environmental tips for the classroom, lighting, and reading are included as well. Also available in electronic format.

FURTHER AND HIGHER EDUCATION FOR PEOPLE WITH USHER SYNDROME: Interview with Emma Hancock
Talbot-Williams, Sarah; Hancock, Emma. 1996. TALKING SENSE, Vol. 42, No. 3, pp. 24-26.
The author interviews a young woman, Emma Hancock, who has Usher syndrome type I and who is a college student in London. The student discusses her difficulties in choosing the right school for her needs and finding financial support for the special services she requires, such as tutoring, interpreting, and note taking. Her difficulties in dealing with the attitudes of her fellow students and instructors and in coping with communication issues are included. The article ends with 11 tips that Ms. Hancock offers others in her situation. 3 pages. Available at:
http://www.sense.org.uk/publications/allpubs/magazine/tsarticles/1996/usherfured.htm

GUIDELINES: Practical Tips for Working and Socializing with Deaf-Blind People
Smith, Theresa B. 2002. Sign Media, Inc.
This second edition of Guidelines includes expanded chapters on topics such as tactile sign language, interpreting, conversation and physical environment. New information and more examples are included. Three new chapters include: Support Service Providers; Authority, Power and Control; and Meetings. The book is intended for people who know sign language, who are already experienced in "deafness" and in interacting with Deaf people, and who want to know more about "deaf-blindness" and interpreting for DeafBlind people. Professional interpreters, student interpreters, and anyone who wants to communicate and/or work more effectively with DeafBlind people will benefit from reading this book. 288 pages. Available from Sign Media, Inc., 4020 Blackburn Lane, Burtonsville, MD 20866. Phone: 800-475-4756. Cost: $24.95 Publisher's web site: http://www.signmedia.com

GUIDING TASKS FOR INTERPRETERS WORKING WITH DEAF-BLIND TRAVELERS
Bourquin, Eugene. 2005, December. VIEWS, Vol. 22, No. 11, pp. 17-19.
Article includes specific techniques and guidelines for human guides working with travelers who are DeafBlind. The author is certified in O&M, interpreting and low vision.

HIRING INTERPRETERS FOR INDIVIDUALS WHO ARE DEAF-BLIND
Raistrick, Kathryn. 1995. AMERICAN REHABILITATION, Vol. 21, No. 2, pp. 19-22.
The effectiveness of qualified interpreters for communication between rehabilitation professionals and DeafBlind clients is discussed. Provision for an interpreter is required under the American Disabilities Act (ADA). Option for use of a paid interpreter instead of a friend or family member should be extended to the consumer, guaranteeing the consumer confidentiality. A qualified interpreter for the DeafBlind needs additional training and experience over the certification requirements of the National Registry of Interpreters of the Deaf (RID). The interpreter must be able to communicate using the mode of the consumer's choice, include visual information as well as auditory, express the emotional tone of the message tactually, use lighting and/or distance to best advantage, and use sighted guide technique and emergency procedures to transport the client from place to place. Strategies for finding, paying, and working with interpreters is included.

HOLISTIC AND INTERACTIVE COMMUNICATION WITH ACQUIRED DEAFBLIND PEOPLE
Lahtinen, Riitta. 1999. NUD NEWS BULLETIN, No. 1.
An article outlining an upcoming research grant focusing on holistic communication strategies in the area of acquired deafblindness. The aims of the research are: to examine the strategies and theoretical models of the function of language for improving communication for acquired DeafBlind people, their family members and interpreters, to analyze and identify how these different methods and techniques can be applied to improve the quality of communication, to identify internationally the most common methods of how a person is able to describe their own emotional feelings, to interpret environmental information and non-verbal signals to DeafBlind persons through touch, and to produce articles, videos and teaching materials during the research project. 2 pages.

IMAGINE: TO BE A PART OF THIS
Grandia, Lex. 2014. In Maya Sabatello and Marianne Schulze (Eds.), Human Rights and Disability Advocacy (pp. 146-156). University of Pennsylvania Press.
The author, who is DeafBlind, describes his experience serving on the first committee to draft a text for the United Nations' Convention on the Rights of Persons with Disabilities.

IMPLICATIONS OF DEAFBLINDNESS: The Physical and Mental Health and Social Trust of Persons with Usher Syndrome Type 3
Wahlqvist, Moa; Möller, Claes; Möller, Kerstin. 2016. JOURNAL OF VISUAL IMPAIRMENT & BLINDNESS, Vol. 110, No. 4, pp. 245-256.
In this Swedish study, 15 adults with Usher syndrome type 3 filled out two questionnaires which covered a wide range of domains related to health and social trust. Results showed poor physical and mental health and severe problems with social trust among participants. Three participants had cochlear implants, and they reported fewer problems in these areas than the others. The authors conclude that interdisciplinary strategies are required to facilitate the rehabilitation of persons with USH3 throughout their lives.

IMPLICATIONS OF VISION LOSS ON THE INTERPRETING PROCESS

Foxman, Leslie; Lampiris, Angela. 1999. In Proceedings of the 16th National Convention of the Registry of Interpreters for the Deaf.

This 14-page article provides in-depth information regarding sign language interpreting for individuals who are DeafBlind. It discusses the multi-dimensional nature of the interpreting role and that teamwork is an essential part. The interpreter is responsible for the transmission of substantial amounts of visual and auditory information and must consider a variety of factors prior to and during their assignment. The authors draw on 10 years combined experience in the field of deaf-blindness, as well as personal observation and informal discussions with consumers and professionals in the field. There is a comprehensive look at the accommodations that must be made prior to and during an interpreting assignment, especially when working with individuals who require tactile or restricted space interpreting. Five categories of vision loss are referenced and their impact on the interpreting process. The authors include topics to consider prior to an assignment, such as personal hygiene, responsibilities, and clothing choices. Recommendations are also listed upon arrival to the assignment, including expectations during the meeting.

IMPROVING ACCESS FOR DEAF-BLIND PEOPLE

DeafBlind Service Center. 1995. Northlight Productions.

This 17-minute video is intended for hearing and sighted people who work in recreational facilities, such as zoos and museums. It explains how to provide service and improve access to facilities for DeafBlind consumers. Communication methods, use of a TTY, how to tell when a DeafBlind person needs help and how to provide it, and DeafBlind culture are discussed. Ways of improving access, such as how to get printed materials made into Braille or large print, provision of good lighting, easy-to-read signage, interpreters and guides, are offered.

INDEPENDENCE WITHOUT SIGHT OR SOUND: Suggestions for Practitioners Working with Deaf-Blind Adults

Sauerburger, Dona. 1993. American Foundation for the Blind.

This book was written to help service providers in working with persons who are DeafBlind. There are numerous examples from actual experience and discussions of practical applications. Sections on service needs, communication, orientation and mobility, sensory deprivation and a survey of dog guide schools. 194 pages. Available from: AFB Press, Customer Service, P.O. Box 1020, Sewickley, PA 15143. Phone: 800-232-3044. Fax: 412-741-0609. Cost: $39.95. Specify print or Braille.

INTERDEPENDENCE WITH OUR VALUABLE SSPS

McNamara, Jamie. 2000, July-September. DEAF-BLIND AMERICAN, Vol. 38, No. 4, pp. 31-36.

This article is excerpted from a speech given by Jamie McNamara at the Missouri Deaf-Blind Association's 7th Anniversary Dinner, April 15, 2000. Presents the concept of interdependence versus independence and the role of support service providers (SSPs). Discusses SSP issues and how to identify problems and brainstorm solutions. Identifies a few ideas to get started on how to find SSPs, and keep them.

INTERPRETING AND TRANSLITERATING FOR PERSONS WHO ARE DEAF-BLIND
Raistrick, Kathryn L. 1988. Illinois Department of Rehabilitation Services.
This brochure is an aid for those who are interpreting for persons who are DeafBlind. Interpreting for this population requires specialized competence and responsibilities. This is an effort to delineate these skills, as well as to discuss considerations for the interpreter both before and at the assignment. Modes of communication for persons who are DeafBlind vary widely due to the etiology of the deaf-blindness, the severity of the vision and hearing loss, as well as the age of onset. A comprehensive listing is included of most of the modes of communication used in the United States with persons who are DeafBlind. This list is not exhaustive; however, it will give the interpreter an overview of some of the varieties of communication options available. The information would also be of value to persons hiring interpreters as well as consumers. Few individuals know how demanding interpreting for persons who are DeafBlind can be. Appropriate preparation by all parties before an interpreting situation could make the interpreting situation much more effective. 13 pages.

INTERPRETING FOR DEAF-BLIND STUDENTS: Factors to Consider
Petronio, Karen. 1988, July. AMERICAN ANNALS OF THE DEAF, pp. 226-229.
Ten DeafBlind college students were interviewed to find out what they need and want from sign language interpreters. This information was combined with findings from observations of many DeafBlind interpreting situations. The focus of this article includes the following four areas: 1) types of signing, 2) modifications to the signing, 3) visual information that needs to be conveyed, 4) other factors that will influence DeafBlind interpreting situations. ERIC number EJ 377 543.

INTERPRETING FOR INDIVIDUALS WHO ARE DEAF-BLIND: Standard Practice Paper
Registry of Interpreters for the Deaf, Inc. 2007.
The amount and type of vision and hearing a person has determines the type of interpreting that will be most effective. This document provides an overview of interpreting for individuals who are DeafBlind including communication modes, environmental considerations, professional standards for interpreters, and a brief description of support service providers (an additional service that an individual who is DeafBlind may request). 3 pages. Available at: http://www.rid.org/UserFiles/File/pdfs/Standard_Practice_Papers/Drafts_June_2006/Deaf-Blind_SPP(1).pdf

INTERPRETING FOR THE DEAF-BLIND
Smithdas, Robert J. 1979, October. NAT-CENT NEWS, pp. 1-4.
This editorial describes the many variables that affect direct, person-to-person communication with DeafBlind individuals and a movement by interpreters to define their rights while interpreting for Deaf or DeafBlind people during meetings and conferences. Since interpreting involves sending and receiving information, it is logical that DeafBlind people should have rights relative to interpreting. He provides a list of suggestions for a definitive code of rights relative to interpreting.

INTERPRETING STRATEGIES FOR DEAF-BLIND STUDENTS: An Interactive Training Tool for Educational Interpreters [DVD & Manual]

Morgan, Susanne. No date. Ohio Center for Deafblind Education, University of Dayton.
This curriculum is designed to train interpreters to work with students who are DeafBlind. It consists of a 60-minute DVD and a 104-page print manual. There are 8 modules covering legal issues related to interpreting and DeafBlind education, interpreting methods (sign language, voicing using an FM system, typing, Braille), environmental and sign language modifications, and strategies to help interpreters work effectively with teachers and students to make sure that DeafBlind students have access to educational content and the classroom environment. It describes how various types of visual impairments (low vision, blurred vision, central field loss, reduced peripheral vision, fluctuating vision) affect the interpreting process and describes sign language modifications such as tracking, tactile sign language (one-handed and two-handed), and print on palm. Each module is followed by a self-check quiz. The narrated DVD provides numerous examples of the content covered by the manual and additional opportunities for self-testing. There is no date listed on either the DVD or the manual, but the curriculum was released in 2005. Cost: $15.00. Copies may be ordered from the Ohio Center for Deafblind Education (OCDBE), 4795 Evanswood Drive, Suite 300, Columbus, OH 43229. Phone: 614-785-1163. E-mail: ocdbe@ssco.org

INTERPRETING THE PHYSICAL ENVIRONMENT FOR DEAFBLIND PEOPLE

Kirk, Tony. 2005. Deafblind International Publications.
This brief article outlines six environmental adaptations that can be made to support a person who is DeafBlind in their independence and self-sufficiency. The adaptations are primarily intended for the home environment, but the concepts can be generalized to an awareness of environmental factors that can pose barriers. Available at:
http://www.deafblindinternational.org/publications_interpreting.html

ISOLATION: A Diary of Subtle Discrimination

Conway, Megan. 2014. REVIEW OF DISABILITY STUDIES, Vol. 10, #1-2, pp. 3-5.
The author describes the isolation caused by subtle discrimination against people with disabilities and provides concrete examples from her own life as well as examples of a broad range of subtle behaviors and events that perpetuate inequities for people with disabilities in post-secondary education. The author describes herself as both legally blind and severely hard of hearing (aka DeafBlind). http://rdsjournal.org/index.php/journal/article/view/27/102

LANGUAGE AND COMMUNICATION IN PEOPLE WHO ARE DEAFBLIND

Vervloed, Mathijs P. J; Damen, Saskia. 2016. In Marc Marschark and Patricia Elizabeth Spencer (Eds.), The Oxford Handbook of Deaf Studies in Language (pp. 325-343). Oxford University Press.
This chapter provides an overview of communication in people with deafblindness, covering levels of communication, modes and functions, using touch, communication challenges, early versus late deafblindness, consequences of limited perception of distant stimuli, social-emotional and behavioral challenges, assessment approaches and tools, augmented and alternative communication (AAC), and building an environment conducive to communication.

LEADERS WHO ARE DEAFBLIND: A Phenomenological Study of Educational Experiences [Dissertation]

Shariff, Risa Amacker. 2014.

This dissertation examines the educational experiences of five leaders from the DeafBlind community. Data collection consisted of two in-depth face-to-face interviews, two participant journals, and document reviews. Critical DeafBlind Theory (CDBT) served as the theoretical framework to determine how the educational experiences of leaders who are DeafBlind were interwoven with the norms and values of the DeafBlind community. Themes that were identified included "not experiencing complete access," "direct and full access," direct "hands on experience" education, extracurricular experiences, "missed a great deal of information," "advocating for myself," "many kids teased us," "discussions with my classmates," self-educating, the importance of role models who are DeafBlind and d/Deaf, and "most of my learning came through reading." Includes some discussion of interpreters and SSPs.

LESSER-KNOWN THINGS ABOUT BEING DEAFBLIND

Ball, Liz. September 11, 2014. BBC News Ouch Blog.

The author educates the public on some of the varied ways in which she and other individuals who are DeafBlind communicate. She is employed by Sense in the UK as a Campaigns Involvement Officer. http://www.bbc.com/news/blogs-ouch-29107899

LOSING TOUCH: A Survey of Sign Language Reception and Modification for Deaf People Who are Losing Their Sight

Woodford, Doreen E. 1987. SENSE/CACDP.

This is the report of an investigation conducted in England commissioned and funded by SENSE and the Council for the Advancement of Communication with All Deaf People (CACDP). It was designed to explore the communication needs brought about by the addition of adventitious visual impairment to an existing hearing loss in which sign language was the chief form of communication, to explore some of the situations imposed by visual impairment, and to offer possible insights and suggestions to professionals and other interested persons. Data was collected through interviews with 30 subjects, 10 of whom had Usher syndrome. Communication methods used by the subjects are discussed. Spoken language, use of residual sight, and sign language must eventually be supplemented by DeafBlind manual communication. Subjects' views on help needed by and best approaches from professionals are included. 16 pages.

MANUAL AND SPOKEN COMMUNICATION

Prickett, Jeanne Glidden. 1995. In Kathleen Mary Huebner, Jeanne Glidden Prickett, Therese Rafalowski Welch, & Elga Joffee (Eds.), Hand in Hand: Essentials of Communication and Orientation and Mobility for Your Students Who Are Deaf-Blind, Vol I. AFB Press.

This chapter examines language-based communication as a mode of interaction for students who are DeafBlind. There are three main sections. The first section covers sign language and includes information about tactile sign language, modifications of sign language for visually impaired persons, visual and tactile tracking, sign language instruction guidelines, considerations for choosing ASL or Signed English for a child, and fingerspelling. The section on fingerspelling includes details about reception modes for tactile fingerspelling (palm-over-palm, palm-in-palm, birdcage). The second section very briefly addresses spoken communication including speech training, auditory training, and Tadoma). The third section covers interpreting for DeafBlind people, working with interpreters, and finding interpreters. 25 pages.

METHODS OF COMMUNICATION, AIDS, AND DEVICES

Couslin, Dooley. 1995. AMERICAN REHABILITATION, Vol. 21, No. 2, pp. 44-47.

This article lists several methods of communication, aids, and devices for DeafBlind individuals. Includes alert/signal vibrating system, alphabet plates, visual fingerspelling, loop system, label machine, and tactual sign language.

MIND OVER MATTER: Coping with Disability

Ulrich, Nancy. No date. Helen Keller National Center.

Roberta Fanicelli interviews Winnie Tunnison about what it is like to be a Deaf adult who then loses her sight. Patricia Capone acts as interpreter for Winnie who signs her responses to Fanicelli's questions. Winnie discusses her emotional and intellectual responses to the realization that she was indeed going blind, including her hospitalization and treatment for depression. Ilene Miner represents the Helen Keller National Center and talks about what the program offers adults who are DeafBlind and the emotional impact often felt by those adults who find they are losing both sight and hearing. 28 minutes. Open captioned. Available from HKNC, 111 Middle Neck Road, Sands Point, NY 11050-1299. Phone: 516-944-8900.

MODIFIED SIGN LANGUAGE FOR CONGENITALLY DEAFBLIND PEOPLE

Thestrup, Ann; Anderson, Ove Vedel. 1994. DEAFBLIND EDUCATION, January-June 1994, pp. 16-17.

This article outlines the work being done in Denmark to modify sign language for use by DeafBlind people. The rationale for the modification, the principles for modifying the signs, and the procedure for standardizing are all listed, as are the future goals in this field.

NATURAL MORAL LAW AND THE RIGHT OF DEAFBLIND PEOPLE TO THE SERVICE OF GUIDE-INTERPRETERS

Jakes, Jan. 2003, July-December. DBI REVIEW, No. 32, pp. 26-27.

In this article the author answers the question, "why do DeafBlind people need the services of guide-interpreters?" The author gives information on guide-interpreters, discusses a person's environment, and addresses the rights of people who are DeafBlind. Also outlines how legislation should address the issues of DeafBlind people.

NEEDS AND CHALLENGES OF SENIORS WITH COMBINED HEARING AND VISION LOSS

McDonnall, Michele C.; Crudden, Adele; LeJeune, B. J. 2016. JOURNAL OF VISUAL IMPAIRMENT & BLINDNESS, Vol. 110, No. 6, pp. 399-411.

This study surveyed 131 individuals with dual sensory loss between the ages of 55 and 99 years about their most important needs, the challenges associated with their sensory losses, and the training needs of the people who interact with them. The most commonly identified needs were transportation, technology training, assistance with errands, and improved communication. Medical providers were identified as the service providers who most need training about dual sensory loss. A majority of respondents thought their local community members, friends, and family also need education. Some differences were noted based on age of onset of sensory losses.

ON BELAY....BELAY ON: Close Encounters in Deaf-Blind Interpreting

Galasso, Patrick 2. VIEWS, Vol. 23, No. 2, February 2006, pp. 20-21.

The author describes his experience interpreting on a cruise of the Western Caribbean with a group of people who are deaf and blind. He emphasizes throughout the article that people who are DeafBlind can enjoy life fully.

ONE OF SOCIETY'S MOST VULNERABLE GROUPS?: A Systematically Conducted Literature Review Exploring the Vulnerability of Deafblind People

Simcock, Peter. 2016. HEALTH & SOCIAL CARE IN THE COMMUNITY, Vol. 25, No. 3, pp. 813–839.

This literature review of 28 articles focuses on the experience of vulnerability in people with deafblindness. While no empirical studies specifically examining this topic were found, DeafBlind people described feelings of vulnerability in studies exploring their experiences more generally and in personal accounts. This population is identified as "at risk" of various adverse outcomes, particularly when compared to the non-DeafBlind majority. The literature largely relates to negative outcomes and includes significantly less exploration of positive risk taking, coping capacity and resilience. Deafblind people do not appear to describe themselves as being vulnerable as a permanent state, suggesting a need for greater exploration of the experience among all sections of this heterogeneous population, with consideration of resilience and coping. http://onlinelibrary.wiley.com/doi/10.1111/hsc.12317/full

OPENING DOORS TO THE THEATRE: Creating Access for the Deaf-Blind Community

Berk, Judy; Cogen, Cathy. 1999. Deaf-Blind Theatre Access Project.

This nine-page "how-to" manual is intended to support theater companies and venues in serving DeafBlind patrons. It was developed by the Northeastern University Interpreter Education Project of New England, Wheelock Family Theatre, Deaf-Blind Contact Center and D.E.A.F., Inc. Creating access requires the coordinated efforts of a variety of people. Roles and responsibilities of the following staff are described: theatre staff, access coordinator, production department, box office, managerial and marketing. The role of interpreters is discussed at length. Topics include payment issues, preparation time, seating options and the use of an American Sign Language consultant. Pre-show tours, monetary considerations and a performance timetable are also included. Sidebars include comments by a DeafBlind patron, a theatrical producer and an interpreter.

OVERVIEW OF TOUCH SIGNALS

Benton, Ashley. 2016. Helen Keller National Center.

This 10-minute video discusses touch signals, Haptics, and Pro-Tactile.

https://www.helenkeller.org/hks/touch-signals-%E2%80%93-personal-perspective

PARTNERS IN LANGUAGE

Helen Keller National Center for Deaf-Blind Youths and Adults.

This 28-minute videotape demonstrates the teaching methods and strategies employed at the Helen Keller National Center to increase communication skills among adults with deaf-blindness and limited language skills. Using a case study approach, communication training is seen as it is provided during functional adult activities (i.e., work, meal preparation, leisure time). Interaction between staff and students are presented. Techniques to encourage non-symbolic and symbolic communications are demonstrated. Specific communication methods such as the use of tangible or object symbols are explained. Interactions between staff and students demonstrate the techniques used to introduce tactual sign language vocabulary. Emphasis is placed on the importance of the environment, turn-taking strategies and role models for language acquisition. A review of all methods and strategies demonstrated at the end of the tape. Available from HKNC, 111 Middleneck Road, Sands Point, NY, 11050, 516-944-8900.

PERCEPTIONS OF SOCIAL NETWORKS BY ADULTS WHO ARE DEAFBLIND

Arndt, Katrina; Parker, Amy. 2016. AMERICAN ANNALS OF THE DEAF, Vol. 161, No. 3, pp. 369-383.

In this study, 10 adults who are DeafBlind were interviewed about their social lives. Additional data was collected from a discussion board and emails from the study participants. Three findings emerged from the data: (a) Navigating adaptations was a significant part of socialization. (b) Gaps existed in work, family, and formal support networks. (c) The participants drew upon resiliency and advocacy to manage these gaps. The article includes a discussion of the Pro-Tactile movement.

PHYSICAL AND PSYCHOLOGICAL HEALTH, SOCIAL TRUST, AND FINANCIAL SITUATION FOR PERSONS WITH USHER SYNDROME TYPE 1

Wahlqvist, Moa; Möller, Kerstin; Möller, Claes. 2016. BRITISH JOURNAL OF VISUAL IMPAIRMENT, Vol. 34, No.1, pp. 15-25.

Through a questionnaire, this study compared 60 persons with deaf-blindness due to Usher syndrome type 1 with a cross-section of the Swedish population. The psychological health, social trust, and financial situation of persons with USH1 were found to be significantly poorer than those of the reference group, although this was not the case for physical health (persons with USH1 only expressed significantly more problems with headache). The USH1 group reported fatigue, loss of confidence, suicide thoughts and attempts, not wanting to go out alone, not receiving help, and having no one to confide in.

POSSIBILITIES: Recreational Experiences of Individuals Who Are Deafblind

Lieberman, Lauren J.; Haegele, Justin A.; Marquez, Maricar. n.d. American Printing House for the Blind.

This web-based publication consists of 18 stories by Deafblind people about their experiences with sports and recreational activities—from triathlon to mountain climbing to speed skating. http://www.aph.org/physical-education/stories/

PRO-TACTILE: The DeafBlind Way (VLOG #1)

Nuccio, Jelica; granda, aj. 2013.

This online vlog is one in a series of online vlogs describing what Pro-Tactile means within the DeafBlind community. "Pro-Tactile" in this context means the value of touch for purposes of communication. During this conversation, Jelica and aj give each other tactile feedback the whole time, tapping on each other's legs, hands, shoulders, and arms with one hand and simultaneously signing with their other hand. 9 minutes, 44 seconds. Available at: http://www.protactile.org/pt-vlog---1.html

PRO-TACTILE: The DeafBlind Way (VLOG #2)

Nuccio, Jelica; granda, aj. 2013.

This online vlog is the second in a series of online vlogs describing what Pro-Tactile means within the DeafBlind community. "Pro-Tactile" in this context means the value of touch for purposes of communication. During this brief presentation, Jelica and aj identify back-channeling as the most important Pro-Tactile (PT) practice. 5 minutes. Available at: http://www.protactile.org/pt-vlog---2.html

PRO-TACTILE: The DeafBlind Way (VLOG #3)

Nuccio, Jelica; granda, aj. 2013.

This online vlog is the third in a series of online vlogs describing what Pro-Tactile means within the DeafBlind community. "Pro-Tactile" in this context means the value of touch for purposes of communication. During this brief presentation, Jelica and aj talk about the difference between haptics and Pro-Tactile. 5 minutes, 35 seconds. Available at: http://www.protactile.org/pt-vlog---3.html

PRO-TACTILE: The DeafBlind Way (VLOG #4)
Nuccio, Jelica; granda, aj. 2013.
This online vlog is the fourth in a series of online vlogs describing what Pro-Tactile means within the DeafBlind community. "Pro-Tactile" in this context means the value of touch for purposes of communication. During this brief conversation, Jelica and aj continue the conversation regarding back-channeling begun on a previous vlog in order to respond to questions they received about the practice. 5 minutes, 17 seconds. Available at: http://www.protactile.org/pt-vlog---4.html

PRO-TACTILE: The DeafBlind Way (VLOG #5)
Nuccio, Jelica; granda, aj. 2016.
This online vlog is the fifth in a series of online vlogs describing what Pro-Tactile means within the DeafBlind community. "Pro-Tactile" in this context means the value of touch for purposes of communication. Available at: http://www.protactile.org/2016/03/pro-tactile-vlog-5_14.html

PROCEEDINGS OF AN INTERNATIONAL SYMPOSIUM ON DEVELOPMENTS AND INNOVATIONS IN INTERPRETING FOR DEAFBLIND PEOPLE Held at Leeuwenhorst, The Netherlands, June 1999
Hawcroft, Lynne; Peckford, Bob (Ed.) 1999. CACDP.
Proceedings of the third annual conference aimed at identifying what was happening in interpreting for DeafBlind people in Europe and to share ideas, information and materials on this subject. Three key issues were examined in a comparative study during the conference: the role and function of the interpreters, models of interpreter training, and the rights of DeafBlind people to interpreter services. Three overview papers are presented addressing the interim results from that study in the areas listed above. Additional technical papers that review recent research, developments and models of training are included in the proceedings as well.

PSYCHOLOGICAL STRESS IN PEOPLE WITH DUAL SENSORY IMPAIRMENT THROUGH USHER SYNDROME TYPE II
Högner, Nadja. 2015. JOURNAL OF VISUAL IMPAIRMENT & BLINDNESS, Vol. 109, No. 3, pp. 185-197.
This study measured stress in people with Usher syndrome type II (USH2) and the influence of personal variables such as age, gender, and employment. Two questionnaires were filled out by 262 people with USH2. Results indicated that people with USH2 have a higher risk of experiencing stress, particularly in regard to orientation and mobility, chronic worry, and social isolation. The authors note the need for rehabilitation services to reduce stress in people with USH2, especially older, female, and unemployed people.

PSYCHOSOCIAL ASPECTS IN USHER SYNDROME
Högner, Nadja. 2016. DBI REVIEW, #56, pp. 22-25.
This article summarizes the recent international research studies on the psychosocial situation of people with Usher syndrome. It covers diagnosis, stress in different areas of life, mental health issues, social stress, self-image and self-esteem, sense of humor, and coping strategies and programs. http://www.deafblindinternational.org/PDF/DbI%20Review%2056.pdf

PSYCHOSOCIAL WELL-BEING AND HEALTH-RELATED QUALITY OF LIFE IN A UK POPULATION WITH USHER SYNDROME

Dean, Gavin; Orford, Amy; Staines, Roy. 2017. BMJ OPEN, Vol. 7, No. 1.

This study surveyed 90 adults with Usher syndrome in the United Kingdom, measuring depressive symptoms, loneliness, and social support and how these related to physical and mental health-related quality of life (HRQOL). Psychosocial well-being was shown to predict physical and mental HRQOL. Increasing depressive symptoms were predictive of poorer physical and mental HRQOL. Higher levels of loneliness predicted poorer mental HRQOL. Finally, increasing levels of social support predicted better mental HRQOL.

http://bmjopen.bmj.com/content/7/1/e013261

QUALITY AND ETHICS IN INTERPRETING: A Three-Year Project with Swedish Consumers

Edenas-Battison, Christina S. 2003. In 13th DbI World Conference on Deafblindness Conference Proceedings, August 5-10, 2003, Mississauga, Ontario, Canada. Canadian Deafblind and Rubella Association.

This is the text of a workshop presentation given at the 13th DbI World Conference on Deaf-Blindness. The 10-page paper describes a three-year project with consumers of interpreting services in Sweden. The project aims to improve the quality of interpreting, especially from an ethical perspective.

QUEST FOR SELF-IMPROVEMENT LEADS TO DEAF-BLIND SYMPHONY

Chambers, Diane L. 2006, February. VIEWS, Vol. 23, No. 2, pp. 6-7.

The author describes her ongoing desire to improve her interpreting skills with DeafBlind individuals. She states besides proficiency in expressive and receptive skills, DeafBlind interpreting calls for insightful thinking and discerning judgment. It requires action that is outside the realm of "regular" interpreting tasks, for it requires being the "ears" and "eyes". She describes her role over the past several years and finishes the article explaining her volunteering experience at Seabeck Conference Center in Seattle, WA for a week as an interpreter/SSP.

SHARING THE SECRETS OF DEAFBLIND INTERPRETING

Hackett, Alix. April 11, 2017. Perkins School for the Blind.

This brief article describes how Perkins spokesperson Jaimi Lard, who is DeafBlind, helped educate interpreters in training at Framingham State University.

http://www.perkins.org/stories/sharing-the-secrets-of-deafblind-interpreting

SHE'S THE EYES, EARS AND VOICE FOR PEOPLE WITH DEAFBLINDNESS

Dwyer, Christine. June 4, 2015. Perkins School for the Blind.

This brief article describes Dwyer's job at Perkins, where she interprets for people who are DeafBlind. http://www.perkins.org/stories/shes-the-eyes-ears-and-voice-for-people-with-deafblindness

SIGN LANGUAGE INTERPRETERS' USE OF HAPTIC SIGNS IN INTERPRETED MEETINGS WITH DEAFBLIND PERSONS

Raanes, Eli; Berge, Sigrid Slettebakk. 2017. JOURNAL OF PRAGMATICS, Vol. 107, pp. 91-104.

This study investigated interpreters' use of haptic signs through analysis of video recordings of a meeting involving five DeafBlind board members of a Norwegian Association for the DeafBlind and seven interpreters. The article describes the spatial organization of the meeting and focuses on how the interpreters used haptic signs to convey information about the environment as well as other participants' nonverbal expressions, including turn-taking behaviors, minimal-response signals, and emotional expressions. Haptic signs provide information that the DeafBlind can use to frame their interactions as well as to regulate their own self-presentation.

SIGN LANGUAGE WITH PEOPLE WHO ARE DEAF-BLIND: Suggestions for Tactile and Visual Modifications

Morgan, Susie. 1998. DEAF-BLIND PERSPECTIVES, Vol. 6, No. 1, pp. 3-7.

This article provides helpful hints about techniques that enhance comfort and ease other concerns when signing with DeafBlind people. Topics discussed include: appearance and attire, distance and seating, signing space, hand positioning, conveying the message, tactile adaptations, describing the full environment, environmental factors and concerns, consumer feedback, and team interpreting. Available at:

http://documents.nationaldb.org/dbp/pdf/sept98.pdf

SIGNED CONVERSATIONS OF DEAF-BLIND PEOPLE

Mesch, Johanna. 2003. 13th DbI World Conference on Deafblindness Conference Proceedings, August 5-10, 2003, Mississauga, Ontario, Canada. Canadian Deafblind and Rubella Association.

This is the text of a workshop presentation given at the 13th DbI World Conference on Deaf-Blindness. The study focuses on turn taking and questions in conversations among DeafBlind people using tactile sign language.

SOCIAL AND PRIVATE SPEECH IN AN INTERPRETED MEETING OF DEAFBLIND PERSONS

Berge, Sigrid Slettebakk. 2014. INTERPRETING, Vol. 16, No. 1, pp. 81-105.

The article explores how the distinction between egocentric and social speech affected the dynamics of interpreter-mediated interaction during a meeting among five DeafBlind board members in Norway. Extracts from a videotape of the meeting were analysed, with a specific focus on two sequences of exchanges involving a board member (Inger), her interpreter and the rest of the group. Inger uses Norwegian Tactile Sign Language with her interpreter, who in turn uses spoken Norwegian and Norwegian Sign Language with the rest of the group. The analysis shows that, while most of Inger's utterances were social and oriented to the other board members, some were of a private nature and directed only to herself. The interpreter evaluated Inger's communicative project constantly and acted accordingly, interpreting the socially oriented utterances but not the private utterances. Based on these findings, the interpreter's performance is discussed in relation not only to professional ethics but also to monological and dialogical perspectives on language and interpreting.

STUDY OF THE TACTUAL AND VISUAL RECEPTION OF FINGERSPELLING

Reed, Charlotte M.; Delhorne, Lorraine A.; Durlach, Nathaniel I.; Fischer, Susan D. 1990. JOURNAL OF SPEECH AND HEARING RESEARCH, Vol. 33, No. 4, pp. 786-797.

The purpose of this study was to examine the ability of experienced DeafBlind subjects to receive fingerspelled materials, including sentences and connected text, through the tactual sense. A parallel study of the reception of fingerspelling through the visual sense was also conducted using sighted Deaf subjects. The study concluded that tactual spelling is sent and received with excellent accuracy at 2-6 letters per second. Visual reception, on the other hand, with the use of variable speed videotape playback, could be shown to be much faster than the sender can form the letters.

STUDY OF THE TACTUAL RECEPTION OF SIGN LANGUAGE

Reed, Charlotte M.; Delhorne, Lorraine A.; Durlach, Nathaniel I.; Fischer, Susan D. 1995. JOURNAL OF SPEECH AND HEARING RESEARCH, Vol. 38, April 1995, pp. 477-489.

In the study reported here, 10 experienced DeafBlind users of either American Sign Language or Pidgin Sign English participated in experiments to determine their ability to receive signed materials including isolated signs and sentences. Experimental results are discussed in terms of differences in performance for isolated signs and sentences, differences in error patterns for the ASL and PSE groups, and communication rates relative to visual reception of sign language and other natural methods of tactual communication.

SUCCESSFUL ADAPTATIONS FOR LEARNING TO USE TOUCH EFFECTIVELY: Working with Spanish-English Interpreters and Translators

2004. http://www.projectsalute.net/Learned/Learnedhtml/SpanishEnglish.html

This website describes issues related to working with Spanish-English interpreters and translators. It focuses on the importance of accurate translation for effective services. It includes how to work with interpreters, such as preparing for the meeting, interacting at the meeting, and discussion after the meeting. It also describes English-Spanish translation issues and problem phrases with a chart that gives words in English with correct and incorrect translations. Designed for parents and teachers working with Deaf and DeafBlind children whose families speak Spanish.

TACTILE INTERPRETING - ARE YOU READY?

Downey, Jodene. 1997, December. VIEWS, Vol. 14, No. 11, p. 12.

In this article various types of tactile interpreting are depicted illustrating possible work assignments an interpreter might encounter. Typing skills may be required if clients use laptop computers that have Braille output devices. Issues such as transportation needs and regulations, multiple roles, and team support for longer interpreting assignments all need to be considered and planned for in advance so the DeafBlind person's needs will be met. Opportunities for obtaining more experience in these areas are listed.

TACTILE SIGN LANGUAGE

Harlin, Deborah. 1996. HKNC-TAC NEWS, Vol. 8, No. 2, p. 8-11.

Tactile sign language is one of the most prevalent communication systems used by DeafBlind individuals and is used in a variety of forms. Tips for tactile sign instruction are offered.

TACTILE SIGN LANGUAGE: Turn Taking and Questions in Signed Conversations of Deaf-Blind People

Mesch, Johanna. 1998. International Studies on Sign Language and Communication of the Deaf, Vol. 38.

TACTILE SWEDISH SIGN LANGUAGE: Turn Taking in Signed Conversations of People Who Are Deaf and Blind

Mesch, Johanna. 2000. In Melanie Metzger (Ed.), Bilingualism and Identity in Deaf Communities (pp. 187-203). Gallaudet University Press.

This chapter describes how DeafBlind people regulate turn-taking in conversations when using tactile sign language. Describes the two different conversation positions, monologue and dialogue, used by DeafBlind signers. Provides line drawings to illustrate how the different positions affect the conversation, and the manual sign structure. Describes turn zones, back-channeling and support turns, all of which direct the flow of the conversation.

TAKE THE HANDS-ON APPROACH

Bull, Elizabeth J. 2008, February. VIEWS, Vol. 25, No. 2, p. 8.

This brief article encourages interpreters to take on assignments with DeafBlind individuals.

TEAM STRUCTURE FOR A DEAF-BLIND STUDENT

Dunn, Betsy J. 2000, March. VIEWS, Vol. 17, No. 3, pp. 16-17.

This article provides examples and role definitions for support team members for a DeafBlind student. Roles of the student, parent, administrator/case manager, primary support teacher, interpreters, vision teacher, and mobility instructor are defined in detail. Various methods to define, establish and communicate the role of each team member to general educators are provided. Sample topics to address in a guidebook for inclusion of a DeafBlind student are included.

THE ACQUISITION OF TACTILE SIGN LANGUAGE BY DEAF-BLIND ADULTS

Steffen, Candace. 1997, December. VIEWS, Vol. 14, No. 11, p. 18.

In this article the question of whether Deaf American Sign Language (ASL) users who become blind and become tactile ASL users, go through the same process of language acquisition as any other second language learner. Typical learner strategies for second language acquisition are compared to the acquisition of tactile sign language.

THE DILEMMA OF DEAF-BLIND INTERPRETING

Sandefur, Ruth. 1997, December. VIEWS, Vol. 14, No. 11, p. 20.

This two-page article highlights some of the differences between the services offered by special support providers (SSP) and DeafBlind Interpreters. The author coordinated interpreting services for meetings during the 1996 National Association of the Deaf Biennial Convention in Portland, Oregon, and uses situations from the convention to illustrate the different tasks of SSP and DeafBlind interpreters.

THE INTERPRETER, OUR BEST AND MOST IMPORTANT AID FOR COMMUNICATION

Johansson, Katarina. 1991, Spring. THE INTERNATIONAL NEWSLETTER FOR THE DEAF-BLIND, 1, pp. 15-17.

Author is Swedish. She describes the need for adequate interpreters internationally. Then she goes on to describe the way interpreters are used in Sweden to help the DeafBlind. The article concludes with the idea that there are still not enough interpreters for all those DeafBlind who could use them.

THE MIND TRAVELLER: The Ragin' Cajun

Sacks, Oliver. 1998. BBC Worldwide Americas, Inc.

This 50-minute video takes a look at Usher syndrome through the experiences of Danny Delcambre, a DeafBlind restaurant owner in Seattle, Washington. Neurologist/author Oliver Sacks explores the nature of DeafBlind culture, American Sign Language, and tactile signing with several DeafBlind adults in both Louisiana and Washington. This is available for loan or videostreaming via the Described and Captioned Media Program (DCMP, www.dcmp.org). Requires membership in DCMP, which is free to qualified applicants.

THE ONLY WAY SIGNING CAN KILL US

Clark, John Lee. 2006. FUTURE REFLECTIONS, Vol. 25, No. 2, p. 11.

This article is a poem written by a person who is DeafBlind reflecting on sign language. Available at: http://www.nfb.org/Images/nfb/Publications/fr/fr22/fr06sum03.htm

THE POWER OF CONNECTION

Maier, Julie. 2015. RESOURCES, Vol. 20, No. 1, pp. 14-16.

The author describes a picnic she attended with members of the advocacy group DeafBlind Citizens in Action (DBCA) and a few students from the San Francisco State University Specialization in Deaf-Blindness teacher training program. She focuses on an interaction between a DBCA member and a boy with CHARGE syndrome.

http://www.cadbs.org/newsletter/resources-summer-20152/

THE RELATIONSHIP BETWEEN WORK AND HEALTH IN PERSONS WITH USHER SYNDROME TYPE 2

Ehn, Mattias; Möller, Kerstin; Danermark, Berth. 2016. JOURNAL OF VISUAL IMPAIRMENT & BLINDNESS, Vol. 110, No. 4, pp. 233-244.

This Swedish study investigated physical and psychological health in persons with Usher syndrome type 2, comparing those who worked with those receiving disability pensions. 67 adults with USH2 filled out a questionnaire. Results showed a high level of physical health problems in both the working and disability pension groups. Participants receiving a disability pension had significantly poorer psychological health than those who were employed. The study highlights the need for early rehabilitation, vocational training, and opportunities to access the labor market for people with USH2.

TIPS FOR DEAF-BLIND CONSUMERS WORKING WITH INTERPRETERS

Reis, Rossana. 2007, April-June. THE DEAF-BLIND AMERICAN, Vol. 46, No. 2, pp. 12-14.

This article gives a list of suggested tips for DeafBlind individuals when working with interpreters. It recommends screening interpreters and advocating for communication and logistic needs. Publisher's web site: http://www.aadb.org/

TIPS FOR INTERPRETERS WORKING WITH DEAF-BLIND CONSUMERS

Reis, Rossana. 2007, April-June.THE DEAF-BLIND AMERICAN, Vol. 46, No. 2, pp. 15-17.

This article suggests do's and don'ts for interpreters who work with DeafBlind consumers. Publisher's web site: http://www.aadb.org/

TIPS FOR STUDENTS WITH USHER SYNDROME: Information Sheet

Baumgarner, Juli. No date.

This one-page information sheet lists accommodations and adaptations that can be made in a classroom for students with Usher syndrome. Includes suggestions for lighting, seating, classroom environment, materials, sign language techniques, orientation and mobility, and self-advocacy. Available at: http://www.unr.edu/ndsip/tipsheets/usher.pdf

TIPS ON MINIMIZING FATIGUE OR PAIN DURING TACTILE COMMUNICATION

Damato, Nadia. 2014. VIEWS, Vol. 31, No. 1, p. 36.

The author of this article is a tactile ASL user. She provides tips to minimize pain for DeafBlind people during Tactile ASL (TASL). Tips on receiving tactile communication as well as tips on providing tactile communication are listed.

TOUCH OF COMMUNICATION

Morgan, Susanne. 2002, August/September. NADMAG, Vol. 2, No. 3, pp. 26, 28.

This two-page article provides information on DeafBlind interpreting. Describes common requests by DeafBlind people for their interpreting needs. Describes the need to show-up early to ascertain individual preferences, such as seating arrangements, the need for tactile sign, and the type of hearing/vision loss experienced by the individual.

TOUCH SIGNALS: Using Touch to Convey Visual and Environmental Information to People who are Deaf-Blind [Online course]
Helen Keller National Center.
https://hkonlinecourses.org/

TOUCHING LIVES: Portraits of Deaf-Blind People
Gordon, Myles; Hajjar, Susan. 2002. Navada Productions.
This 56-minute video is a documentary by an interpreter. Susan Hajjar grew up with three siblings who are DeafBlind and tells the story of how their influence affected her life. The video features Jamie Lard, a DeafBlind woman who advocates on behalf of DeafBlind people. Jamie describes her upbringing including her time as a student at Perkins School for the Blind, and now as an adult living independently. It also features Harry Anderson, president of the American Association of the DeafBlind (AADB), and Ona Stewart, a DeafBlind woman with Usher syndrome who lives and works independently in a large city. Barbara Wagreich, who is orally trained and uses fingerspelling, is a software engineer who is unemployed at the time of the taping. She describes the difficulties she faces in gaining employment especially in a declining labor market of information technology. Describes how many people with deafblindness face isolation and loneliness. Other profiles include Chuck Ferraro and the Tracy family. A transcript of the video is also available.

UNDERSTANDING SSP SITUATIONS: Workshop Proceedings
Thomas, Laura J. 1998. DEAF-BLIND AMERICAN, Vol. 37, No. 1, pp. 6-7.
An outline of workshop discussing improving relationships between SSPs (Support Service Providers) and DeafBlind consumers in working and playing, learning how to express wants and needs to each other, and developing skills in respecting one another's opinions and suggestions.

USING HAPTICES IN HEALTH CARE SETTINGS
Lahtinen, Riitta; Palmerand, Russ; Tuomaala, Sanna. 2016. DBI REVIEW, #56, pp. 18-19.
Two individuals with Usher syndrome describe their experiences using haptics in a hospital setting. Illustrations of several medical-related haptic signals are included.
http://www.deafblindinternational.org/PDF/DbI%20Review%2056.pdf

USING INTERPRETERS WITH DEAF-BLIND CLIENTS: What Professional Service Providers Should Know
Bourquin, Eugene A. 1996. RE:VIEW, Vol. XXVII, No. 4, pp. 149-154.
This article provides recommendations for using interpreters with DeafBlind clients. It describes the importance of using professional interpreters and not accepting an unqualified "signer" with good intentions. The communication process suffers without professional interpreters.

VICTORY, MEASURED BY THE HEART
Hane, John. 1999, April-June. DEAF-BLIND AMERICAN, Vol. 37, No. 3, pp. 11-14.
An article highlighting the successful efforts of a woman with Usher syndrome completing a triathlon with the assistance of a support team of interpreters and guides. Describes Maricar Marquez's experiences as a woman who is DeafBlind and her will to do many things including rock climbing, exploring caves, skydiving, and triathlon.

VIDEO RELAY SERVICES FOR PEOPLE WHO ARE DEAF-BLIND
Gasaway, Mark A. 2007, April-June. THE DEAF-BLIND AMERICAN, Vol. 46, No. 2, pp. 22-26.
This article discusses the results of a survey sent to the AADB-L listserv and other major listservs for DeafBlind people. It asked five questions pertaining to the use of video relay service interpreting. Publisher's web site: http://www.aadb.org/

WALK IN MY SHOES: An Anthology on Usher Syndrome
DeWitt, Charlotte J. (Ed.). 2016. Merrimack Media.
This book is a collection of 27 personal accounts written by people with Usher syndrome and their family members. The authors are from all walks of life and the stories encompass a wide range of experiences. They are organized into five sections: "Diagnosis: Learning, Accepting, Living with Usher Syndrome," "Life in an Usher Family," "Independent Living," "Professional Life as an Usher Person," and "Inspiring Tales: Who Says I Can't?"

WHAT ARE TOUCH SIGNALS? [Listserv message]
Helen Keller National Center. 2016.
A brief overview of touch signals, including Haptic Communication and Back-Back Channeling, that was sent out to the Professionals Serving Deaf-Blind Consumers Listserv.
https://nationaldb.org/library/page/2588

WHAT HAPPENS IN TACTILE ASL?
Collins, Steven; Petronio, Karen. 1998. In Ceil Lucas (Ed.), Pinky Extension and Eye Gaze: Language Use in Deaf Communities. Gallaudet University Press.
This study focused on tactile ASL as it was used by fluent DeafBlind ASL users when they communicated tactilely with other fluent DeafBlind ASL users. Selected linguistic features from four subfields of linguistics (phonology, morphology, syntax and discourse) were studied. Comparing visual ASL with tactile ASL provided a unique opportunity to observe the variation and change that occurred when a community of fluent DeafBlind ASL signers used a visual language in a tactile mode. 20 pages.

WHAT IS VISUAL INFORMATION?
Jacobs, Rhonda. 2007, April-June. THE DEAF-BLIND AMERICAN, Vol. 46, No. 2, pp. 7-11.
There are many aspects and levels of visual information: places and things; mood, tone and affect; social and interactional processes; printed material; and what stands out as unusual. This five-page article focuses on mood, tone and affect, as these factors often provide the unsaid sense of a speaker and are often left out of an interpretation. Publisher's web site:
http://www.aadb.org/

WHAT MAKES A GOOD SSP AND A GOOD DEAF-BLIND CONSUMER
Gasaway, Mark; Lascek, Susan. 2003, April-June. THE DEAF-BLIND AMERICAN, Vol. 42, No. 2, pp. 23-28.
The information in the article was compiled from DeafBlind consumers and Support Service Providers (SSP) at Georgia's Deaf-Blind Access of the South camp. It includes lists developed by participants on what makes a good SSP and what makes a good DeafBlind consumer. The section on a good SSP includes attributes such as attitude, time, skills, transportation, and other issues. The section on a good consumer includes attitude, skills and knowledge, and speaking up. The article gives specifics on each attribute as well as information on how the lists were developed.

WORDS IN MY HANDS: A Teacher, a Deaf-Blind Man, an Unforgettable Journey
Chambers, Diane. 2004. Ellexa Press LLC.
After his wife died when he was 86, Bert Reidel, a man with Usher syndrome, moved to Colorado to live with his son and daughter-in-law. Although Bert was an expert Braille reader, he had never learned sign language and his wife had been his eyes and ears to the world. This book tells the story of Bert's life and how he learned sign language beginning at age 86. It illustrates that it is never too late to learn as it describes how sign language transformed not only Bert's life, but the lives of his family, friends, and the interpreter who was his sign language teacher. 263 pages. Cost $15.95. Publisher's website: www.ellexapress.com

WORKING WITH THE DEAF-BLIND COMMUNITY
Weiss, Diane Goldberg. 1993, September. NAT-CENT NEWS, Vol. 24, No. 1, pp. 29-39.
Weiss discusses the diversity of needs interpreters meet in working with the DeafBlind community. The article notes the differing amounts of residual hearing or sight people who are DeafBlind have. It also explains the different modalities used by DeafBlind communicators and the different methods of communicating depending on the DeafBlind person's preferences. The importance of setting and logistics of any interaction is also pointed out.

Section 2: Baseline Survey

2017
Prepared by:
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Overview

The materials presented here on interpreting with DeafBlind people are intended for interpreters and interpreter educators, as well as for DeafBlind people seeking resources on advocacy and working with interpreters. There is also information useful to researchers, interpreter coordinators, vocational rehabilitation specialists, and others seeking to increase their knowledge in this area.

This document is available in electronic format on the DBI website at www.dbinterpreting.org. It can also be found in the DBI digital repository online at http://digitalcommons.wou.edu/dbi, and in the NCDB Library.

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Executive Summary

An online survey among 752 respondents conducted in the summer of 2017 assessed the current status of the availability and knowledge set of DeafBlind interpreters in the United States.

Respondents to this survey are spread widely across the United States, with California providing one in ten respondents. New York, Texas, and Washington provided between five and six percent each. Other states provided just one respondent. One would think that the interpreter population might follow the population patterns across the states, this does not appear to be the case. While it is unsurprising that states with large populations, such as California and New York, have large interpreter populations, it is interesting to note that states whose population fell in the lower 50% percentile, such as Oregon and Utah, have relatively large interpreter populations. This indicates that there are areas that may be oversaturated with interpreters, while other locations could be viewed as deserts, and the needs of the DeafBlind residents within the area may not be met.

Over nine in ten respondents have interpreted for DeafBlind individuals, with seven in ten interpreting in the past year. The majority of DeafBlind interpreters have spent less than one-fourth of their time on interpreting for DeafBlind individuals in the past year. Just one in six have spent half or more of their time interpreting for DeafBlind individuals in the past year. DeafBlind interpreters have spent about 100 hours on average interpreting for DeafBlind individuals in the past year. However, there is a wide range of interpreting hours, ranging from just one hour to 3,360 hours. This indicates that interpreting services for DeafBlind people do not constitute a large part of interpreters' time. Among those who have spent 50% or more of their time interpreting for DeafBlind individuals, New York, North Carolina, and Washington seem to have higher concentration of interpreters who focus their time on DeafBlind individuals.

By far, the most widely given reason quoted for not providing interpreting services over the past year involves the lack of opportunity to work with DeafBlind individuals in their state or area. Lack of appropriate skills or training is stated as the second most common reason. While only a very small portion of interpreters (under ten percent) has never interpreted for DeafBlind individuals, lack of the requisite training is the most often cited reason for not doing so.

A large portion of respondents indicated that they are either nationally, state-level, or agency-level certified for interpreting services. Over three in five are nationally certified interpreters, while one in four hold a state-level certification. One in ten are both nationally and state-level certified for interpreting in general. About two in five DeafBlind interpreters identify themselves as proficient, with comprehensive skills in the field of DeafBlind interpreting. Just as many view themselves as having intermediate skills in this field.

By far, ASL and Tactile ASL (TASL) are the most widely used communication modalities when interpreting for DeafBlind individuals, used always or often by about four in five DeafBlind interpreters. Protactile ASL, by contrast, is always or often used by only about three in ten interpreters. Two in five never use PTASL, although over one in four stated that they had protactile ASL training. Overall, interpreters listed a wide variety of communication modalities for their work with DeafBlind individuals. One interpreter responded that they use whatever works, demonstrating that there seems to be no clear-cut method of communication with the DeafBlind community.

About seven in ten DeafBlind interpreters learned their skills from DeafBlind individuals. Nearly two in three learned their skills from conferences or workshops specific to working with DeafBlind individuals. Half indicated they learned with experienced DeafBlind interpreters.

Interest in the field of DeafBlind interpreting is clearly shown by nearly three-fourths of respondents who agreed to future contact from the DeafBlind Interpreting National Training and Resource Center. One-third want their contact information added to the shared interpreting grants general interest mailing list, while slightly more agreed to future contact about DeafBlind Interpreting. Three in five DeafBlind interpreters are interested in joining a national directory of DeafBlind interpreters. This interest is especially high among interpreters who consider themselves to have proficient DeafBlind interpreting skills.

Likewise, interest in training on protactile American Sign Language (PTASL) is very high. Overall, nearly nine in ten respondents show interest in receiving PTASL training. Interest is especially high among those who already know a little about PTASL, demonstrating that interpreters do not feel too comfortable with their current skill level. Of those who responded they have never interpreted for DeafBlind individuals, due to no relevant training or feeling intimidated, three-fourths are still interested in receiving PTASL training. This again points toward the increased need to offer such training to prepare more qualified DeafBlind interpreters.

When it comes to trainers and programs to teach DeafBlind interpreting skills, there is quite a large amount of skew, with only five to six trainers providing the vast majority of the instruction. Increasing access to training may entail increasing the number of qualified and competent instructors throughout the United States. In addition, the programs that train the most interpreters correspond with universities, and these universities are, for the most part, within states that have relatively large interpreter populations. As stated above, the main reason cited for not interpreting in the last year is due to lack of opportunity. These statements suggest that interpreters are staying near where they received their education and are not moving to where the need may be highest.

The information in this *Baseline Survey* will be used to drive the creation of a needs assessment of the DeafBlind community in regard to DeafBlind interpreting. In addition, the information will be used as a pre-assessment of the interpreting population to determine how well the current project is able to address the needs of the community.

Survey Background

The DeafBlind Interpreting National Training and Resource Center (DBI) conducted a baseline survey to establish the number of interpreters who are working with DeafBlind individuals in various capacities. The survey invitation was sent to all members of the DeafBlind Member Section of the Registry of Interpreters for the Deaf, and the Professionals Serving DeafBlind Consumers email distribution list. Additionally, the survey invitation was distributed via the following Facebook groups and pages:

- DBI
- DeafBlind Member Section
- Discover Interpreting
- NTFDBI, the National Task Force on DeafBlind Interpreting
- Registry of Interpreters for the Deaf
- Support Service Providers for our DeafBlind Community
- Seabeck DeafBlind Retreat

The Regional Resource Center on Deafness at Western Oregon University online responses were captured using the Qualtrics survey platform. The survey opened on Friday, June 23rd and closed on Monday, August 7th, 2017. An informed consent page explained the background and purpose of the survey; respondents who agreed to the terms were subsequently able to participate in the survey.

A total of 857 survey responses were collected. During the database preparation, 65 responses were deleted as they stopped after agreeing to the consent form. An additional 32 responses were deleted as the respondents answered only the first question, while another 8 responses were completed by respondents residing outside of the United States. The final database contains 752 responses. As some questions were voluntary and other questions were based to specific previous survey answers (meaning respondents had to answer in a specific way to a previous question to see a follow-up question), respondents did not complete all questions; some also dropped out before they finished the survey. *All percentages given are based on those who answered the specific question.*

Percentages may not add to 100% due to rounding. In questions with multiple responses, percentages do not add to 100%.

Demographic Information of Survey Respondents

Geographic Distribution

Respondents are widely distributed across the United States, with California providing one in ten (10.2%: N=66) respondents. New York, Texas, and Washington provided between five and six percent each. Just one respondent came from each Alaska, Maine, Montana, North Dakota, Rhode Island, South Carolina, South Dakota, and Wyoming.

Table 1. Geographic Distribution of Respondents

State (N=650)	Percent	Count	State (N=650)	Percent	Count
Alabama	0.3	2	Montana	0.2	1
Alaska	0.2	1	Nebraska	1.1	7
Arizona	1.2	8	Nevada	0.6	4
Arkansas	1.2	8	New Hampshire	0.6	4
California	10.2	66	New Jersey	2.9	19
Colorado	1.7	11	New Mexico	1.1	7
Connecticut	0.3	2	New York	5.5	36
District of Columbia	1.8	12	North Carolina	2.9	19
Florida	4.6	30	North Dakota	0.2	1
Georgia	3.7	24	Ohio	2.5	16
Hawaii	0.6	4	Oklahoma	0.5	3
Idaho	1.2	8	Oregon	4.0	26
Illinois	2.3	15	Pennsylvania	2.8	18
Indiana	0.6	4	Puerto Rico	0.5	3
Iowa	1.2	8	Rhode Island	0.2	1
Kansas	1.7	11	South Carolina	0.2	1
Kentucky	0.6	4	South Dakota	0.2	1
Louisiana	0.8	5	Tennessee	0.3	2
Maine	0.2	1	Texas	5.8	38
Maryland	4.8	31	Utah	4.6	30
Massachusetts	2.5	16	Vermont	0.9	6
Michigan	2.3	15	Virginia	2.8	18
Minnesota	3.2	21	Washington	6.3	41
Mississippi	1.4	9	Wisconsin	1.7	11
Missouri	3.1	20	Wyoming	0.2	1

Results were further analyzed by the Registry of Interpreters for the Deaf (RID) regions. As Table 2 shows, more respondents reside in RID Region V (28.9%; N=188) than in other regions, mostly driven by the higher proportion of California respondents. Region II (23.2%; N=151) contributes the second highest proportion.

Table 2. Geographic Distribution of Respondents by RID Region

RID Region (N=650)	Percent	Count
Region I (STATES: *Connecticut, Delaware, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont, West Virginia*)	15.8	103
Region II (STATES: *Alabama, Florida, Georgia, Maryland & District of Columbia (Potomac Chapter), Mississippi, North Carolina, Puerto Rico, South Carolina, Tennessee, Virginia*)	23.2	151
Region III (*STATES: Illinois, Indiana, Kentucky, Michigan, Minnesota, Ohio, Wisconsin*)	13.2	86
Region IV (STATES: *Arkansas, Colorado, Iowa, Kansas, Louisiana, Missouri, Montana, Nebraska, New Mexico, North Dakota, Oklahoma, South Dakota, Texas, Wyoming*)	18.8	122
Region V (STATES: *Alaska, Arizona, California, Hawaii, Idaho, Nevada, Oregon, Utah, Washington*)	28.9	188

Hearing/Blind Status

Over seventeen percent (N=113) of respondents identified as Deaf, and another 4.3% (N=28) identified as hard of hearing. Three respondents identified as either DeafBlind or Hearing & Blind.

Table 3. Status

Identity Reported (N=649)	Percent	Count
Deaf	17.4	113
Hard of Hearing	4.3	28
Hearing	77.8	505
DeafBlind	0.3	2
Hearing & Blind	0.2	1

Demographics

Over four in five respondents (87.5%; N=568) indicated they are White/Caucasian, with few (5.7%; N=37) subsequently indicating they are Hispanic. Nearly four in five (78.9%; N=512) are women.

Table 4. Demographic Information

Demographic Criterion (N=649) (Multiple Responses Allowed)	Percent	Count
Race/Ethnicity: White/Caucasian	87.5	568
Race/Ethnicity: Black/African American	5.4	35
Race/Ethnicity: American Indian/Alaska Native	2.3	15
Race/Ethnicity: Asian	1.7	11

Demographic Criterion (N=649) (Multiple Responses Allowed)	Percent	Count
Race/Ethnicity: Native Hawaiian/Pacific Islander	0.8	5
Race/Ethnicity: Refuse to Provide	5.6	37
Hispanic: Yes	5.7	37
Hispanic: No	90.4	587
Hispanic: Refuse to provide	3.9	25
Gender: Male	18.2	118
Gender: Female	78.9	512
Gender: Trans/Non-binary	0.8	5
Gender: Refuse to provide	2.2	14

Interpreting for the DeafBlind Community

DeafBlind Interpreting Status

Seven in ten (71.0%; N=534) respondents have interpreted for DeafBlind individuals in the past year. For another two in ten (21.9%; N=165), such interpreting occurred prior to that time period. Only a small proportion (7.0%; N=53) of respondents have ***never*** interpreted for the DeafBlind community.

Table 5: Interpreting for DeafBlind in Past Year

Status (N=752)	Percent	Count
Have interpreted for DeafBlind individuals in the past year	71.0	534
Have not interpreted for DeafBlind individuals in the past year	21.9	165
Have never interpreted for DeafBlind individuals	7.0	53

On average, DeafBlind interpreters (N=533) have spent about 100 (101.0) hours interpreting for DeafBlind individuals in the past year. However, there is a wide range of interpreting hours, with some respondents (1.9%; N=10) only interpreting for just one hour, while eight (1.1%) respondents indicated they interpreted for 1,000 hours or more (overall, responses ranged from 1 to 3,360 hours).

Length of Interpreting Career

On average, respondents have interpreted for about 18 years (18.1%; N=613). Just over one in ten (13.9%; N=85) have interpreted for less than 5 years. However, over four in ten (45.4%; N=278) have interpreted for 20 or more years.

Certifications or Screenings

While about one in six (16.0%; N=104) indicate that they hold no certification or screening, over three in five (62.7%; N=407) are nationally certified interpreters, while one in four (23.3%; N=151) hold a state-level certification. One in ten (11.1%; N=72) are both nationally and state-level certified for interpreting.

Table 6: Certifications Held

Certification (N=649) (Multiple Responses Allowed)	Percent	Count
Nationally certified (e.g., RID, NAD, EIPA, ASLTA)	62.7	407
State QAST or certified	23.3	151
Both nationally and State QUAST or certified	11.1	72
Agency screened	13.4	87

Certification (N=649) (Multiple Responses Allowed)	Percent	Count
Working on license/certification	2.5	16
Educational degree	1.5	10
Specialty Certification/Endorsement via RID or affiliate	1.2	8
Lapsed certification	1.1	7
Other	0.2	1
None	16.0	104

Among those who hold *any* certification (national/state/agency screened/specialty certification or endorsement), 9.9% (N=51) are Deaf. Another 3.7% (N=19) are hard of hearing.
Region V (28.8%; N=147) and Region II (23.9%; N=122) contain the most respondents who have national, state, agency level, or specialty certification. These regions also supplied a higher portion of respondents. Within each region, about three-fourths of interpreters hold either national or state certification or are agency screened.

Table 7: Certifications Held by RID Region

(N=511)	Percent	Count
Region I (N=103)	15.1	77
Region II (N=151)	23.9	122
Region III (N=86)	13.1	67
Region IV (N=122)	19.2	98
Region V (N=188)	28.8	147

Past DeafBlind Interpreters
Among DeafBlind interpreters who have not interpreted in the past year, over one in three (35.2; N=58) have done so 1 to 2 years ago. About one in six (16.4%; N=27) have not interpreted for DeafBlind individuals in 11 or more years.

Table 8: Last Time Interpreted for DeafBlind

Time Period Base: Have Not Interpreted in Past Year (N=165)	Percent	Count
1-2 years ago	35.2	58
3-5 years ago	33.9	56
6-10 years ago	14.5	24
11 or more years ago	16.4	27

By far, the most widely given reason for not interpreting for DeafBlind individuals in the past year involves the lack of opportunity to do so in their area or state (41.9%; N=67). One in five (19.4%; N=31) feel they lack the skills or training for it. Quite a few interpreters hold a position where DeafBlind interpreting is not required (16.9%; N=27) or they switched to a different field and/or retired from interpreting (8.1%; N=13).

Table 9: Reasons for NOT Interpreting for DeafBlind in Past Year

Reason for not interpreting for DeafBlind in the past year Base: Have Not Interpreted for DeafBlind in Past Year (N=160) (Open Ended Question; Upcoded; Multiple Responses)	Percent	Count
No opportunity to work with DeafBlind in area/state	41.9	67
Feel like no skills or experience/lack of training	19.4	31
Current position does not require DeafBlind interpreting	16.9	27
I work in a different field/I'm retired/semiretired from interpreting	8.1	13
Schedule conflict/other issues	6.3	10
Feel like lack of physical endurance	5.6	9
No credential for it	4.4	7
Do not care for it	3.8	6
Partnered with Deaf Interpreters (DIs or Certified DIs)	2.5	4
Other	6.3	10

Interpreters Who Have Never Interpreted for DeafBlind Individuals

Among respondents who have never interpreted for DeafBlind individuals (N=53), three in four (75.5%; N=40) lack the needed training. Half (52.8%; N=28) say there are few DeafBlind individuals in their area.

Figure 1. Reasons Not to Interpret for DeafBlind Individuals

Reasons Not to Interpret for DeafBlind
(Base: Never Interpreted for DeafBlind) (N=53)
(Multiple Responses Allowed)

- No training in this specialty area (N=40): 75.5%
- Very few DB individuals in area (N=28): 52.8%
- Intimitated by what their needs might be (N=8): 15.1%
- Not something of interest (N=5): 9.4%
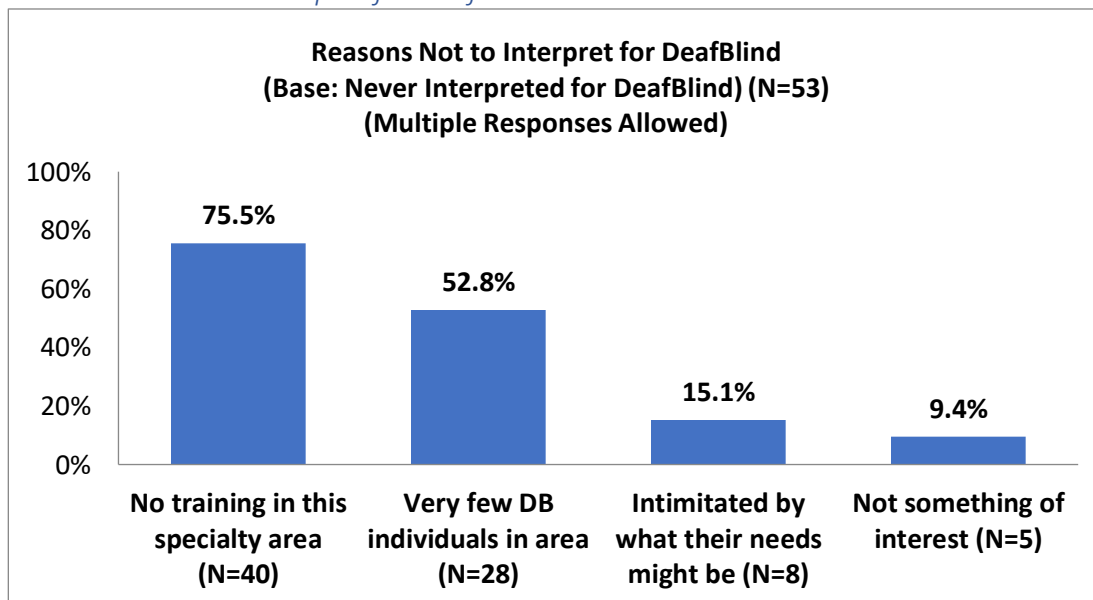
DeafBlind Interpreters in Past Year

The majority of interpreters (70.4%; N=376) have spent less than one-fourth of their time on interpreting for DeafBlind individuals in the past year. One in six (16.3%; N=87) have spent half or more of their time interpreting for the DeafBlind in the past year.

Figure 2: Proportion of Time Spent on Interpreting for DeafBlind Individuals in Past Year

Proportion of Time Interpreting for DeafBlind in Past Year
(Base: Have Interpreted for DeafBlind in Past Year) (N=534)

Category	Percent
24% or less (N=376)	70.4%
25-49% (N=71)	13.3%
50-74% (N=35)	6.6%
Over 75% (N=52)	9.7%
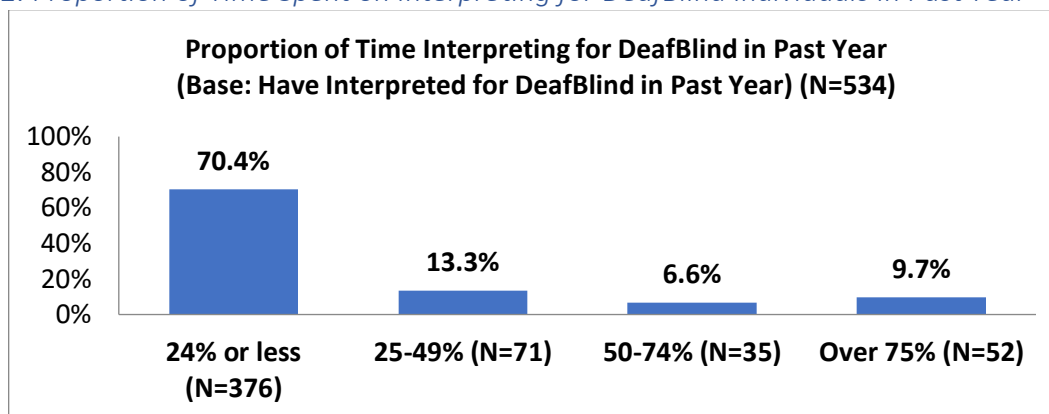
Among respondents who interpreted for the DeafBlind in the past year, the most common setting was in the community, such as in medical settings (73.2%; N=391). Over two in five either interpreted at social events or activities (45.9%; N=245), with nearly as many interpreting at work (39.0%; N=208). Clearly, DeafBlind interpreters work in a variety of settings as the table below illustrates.

Table 10. Settings to Interpret for DeafBlind Individuals

Setting Base: Interpreted for DeafBlind in Past Year (N=534) (Multiple Responses Allowed)	Percent	Count
Community (e.g., Video Relay Settings, medical settings, such as hospitals, doctor appointments)	73.2	391
Recreational and social activities or DeafBlind events	45.9	245
Work	39.0	208
Postsecondary educational settings / adult community classes/adult education	18.4	98
Religious or spiritual services	18.0	96
Conferences/workshops/trainings	9.0	48
K-12	8.6	46
Families/friends of DeafBlind	6.2	33
Committee meetings	4.5	24
Government/Agency/Voc Rehab settings	3.4	18
Pre K/early intervention	1.7	9
Presentations led by DeafBlind leaders	1.1	7

Setting Base: Interpreted for DeafBlind in Past Year (N=534) (Multiple Responses Allowed)	Percent	Count
Court/legal settings	1.1	7
Support Service Provider (SSP role)	1.1	6
DeafBlind residence/in-home	0.9	5
Other	0.6	3

DeafBlind Interpreters Who Spent 50% or More of Their Time Interpreting for DeafBlind Individuals in Past Year

Table 11 shows the geographic distribution of the 87 interpreters who have spent 50% or more of their time interpreting for DeafBlind individuals. Of the 81 respondents who indicated their state of residence, New York (N=5), North Carolina (N=5), and Washington (N=8) have a higher concentration of interpreters who focus their time on DeafBlind individuals.

Table 11. Residence of Respondents Interpreting 50%+ in Past Year

State (N=81)	Percent	Count	State (N=81)	Percent	Count
Arizona	1.2	1	Nebraska	1.2	1
Arkansas	2.5	2	New Jersey	1.2	1
California	4.9	4	New York	6.2	5
Colorado	1.2	1	North Carolina	6.2	5
District of Columbia	4.9	4	Ohio	2.5	2
Florida	3.7	3	Oklahoma	1.2	1
Georgia	3.7	3	Oregon	3.7	3
Illinois	2.5	2	Pennsylvania	6.2	5
Iowa	1.2	1	Texas	6.2	5
Kansas	1.2	1	Utah	1.2	1
Louisiana	1.2	1	Vermont	2.5	2
Maryland	4.9	4	Virginia	2.5	2
Massachusetts	3.7	3	Washington	9.9	8
Michigan	1.2	1	Wisconsin	1.2	1
Minnesota	7.4	6	Wyoming	1.2	1
Mississippi	1.2	1			

RID Region II contributes the most interpreters who spent 50% or more of their time in the past year interpreting for DeafBlind individuals (see Table 12).

Table 12. Residence of Respondents Interpreting for DeafBlind 50%+ in Past Year by RID Region

RID Region (N=81)	Percent	Count
Region I	19.8	16
Region II	27.2	22
Region III	14.8	12
Region IV	17.3	14
Region V	21.0	17

Among these DeafBlind interpreters who then also identified their hearing status (N=81), fully half (50.6%; N=41) describe themselves as Deaf, with 3.7% (N=3) saying they are hard of hearing. One person identifies as DeafBlind.

Among respondents who interpreted 50% or more of their time for DeafBlind individuals in the past year, the most common settings were in the community, such as medical settings (71.3%; N=62), or during recreational or social events (75.9%; N=66). Over half (55.2%; N=48) interpreted at work.

Table 13. Settings to Interpret for DeafBlind among Those interpreting 50%+ in Past Year

Setting Base: Interpreted for DeafBlind in Past Year 50% or more of their time (N=87) (Multiple Responses Allowed)	Percent	Count
Community (e.g., Video Relay Settings, medical settings, such as hospitals, doctor appointments)	71.3	62
Recreational and social activities or DeafBlind events	75.9	66
Work	55.2	48
Religious or spiritual services	24.1	21
Postsecondary educational settings / adult community classes/adult education	21.8	19
K-12	14.9	13
Conferences/workshops/trainings	10.3	9
Families/friends of DeafBlind	8.0	7
Government/Agency/Voc Rehab settings	2.3	2
Committee meetings	2.3	2
Pre K/early intervention	1.1	1
Presentations led by DeafBlind leaders	1.1	1
Court/legal settings	1.1	1
DeafBlind residence/in-home	1.1	1
Support Service Provider (SSP role)	1.1	1
Other	1.1	1

Skills and Abilities as DeafBlind Interpreters

Proficiency as DeafBlind Interpreter

About two in five DeafBlind interpreters (39.7%; N=265) identify themselves as proficient, with comprehensive skills and knowledge in the field of DeafBlind interpreting. Just as many (41.5%; N=277) view themselves as having intermediate skills, while far fewer (18.7%; N=125) consider themselves to be novices in this interpreting field.

Figure 3. Level of Skills as DeafBlind Interpreter

Level of DeafBlind Interpreter Skills (Base: Have Interpreted for DeafBlind) (N=667)

Proficient: Comprehensive skills and knowledge in field of DeafBlind interpreting (N=265)	39.7%
Intermediate: Transitional; in-between novice and proficient. Emerging. (N=277)	41.5%
Novice: New or inexperienced in DeafBlind interpreting field (N=125)	18.7%
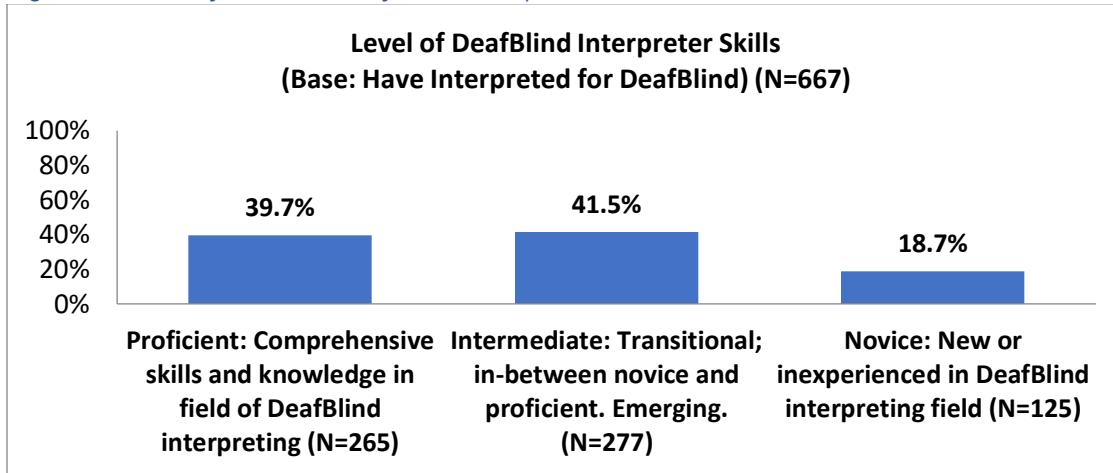
A greater percentage of respondents from RID Region III consider themselves as proficient DeafBlind interpreters when compared to other regions (52.5%; N=42). Half of RID Region V (50.6%; N=82) consider themselves to have intermediate skills.

Figure 4: Level of DeafBlind Interpreting Skills by RID Region

Level of DeafBlind Interpreter Skills by RID Region (Base: Have Interpreted for DeafBlind) (N=597)

RID Region	Novice	Intermediate	Proficient
RID Region I (N=100)	25.0%	40.0%	35.0%
RID Region II (N=144)	20.1%	38.2%	41.7%
RID Region III (N=80)	12.5%	35.0%	52.5%
RID Region IV (N=111)	20.7%	40.5%	38.7%
RID Region V (N=162)	14.2%	50.6%	35.2%
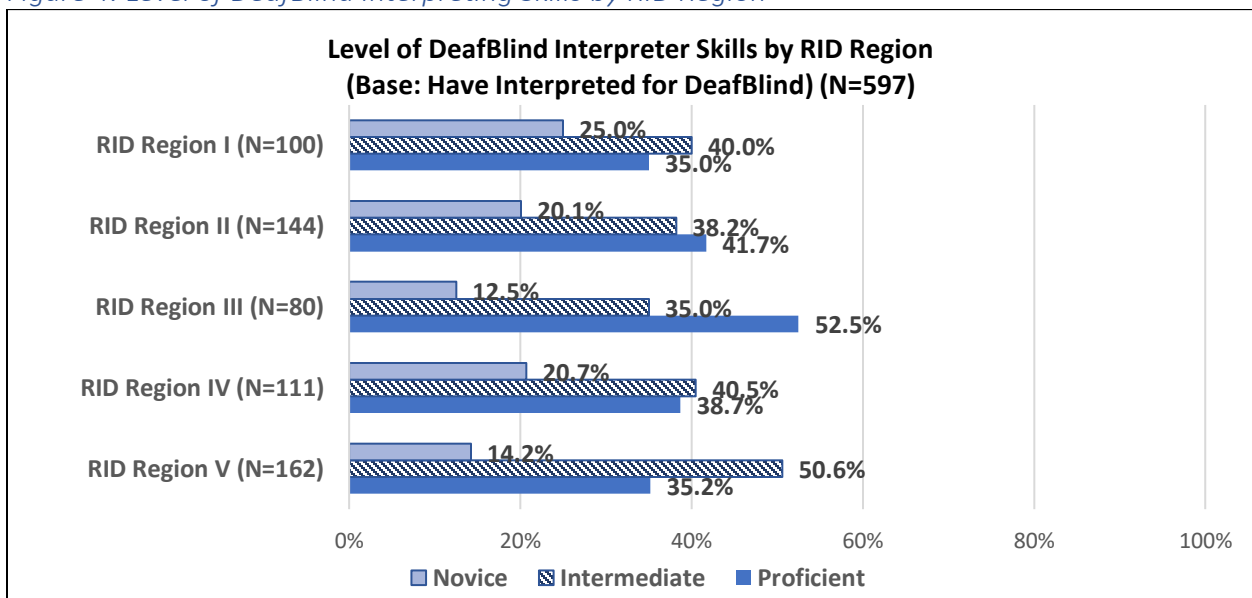
Communication Modalities

By far, ASL and Tactile ASL (TASL) are the most widely used communication modalities when interpreting for DeafBlind people, used always or often by about four in five DeafBlind interpreters. Protactile ASL, by contrast, is always or often used by only about three in ten interpreters (30.0%; N=200). Two in five never use PTASL (40.3%; N=269). Haptics and Sim-Com/sign-supported speech are also not widely used.

Table 14. Communication Modalities Used for DeafBlind Interpreting

Modality Base: Interpreted for DeafBlind People (N=667)	Always/ Often	Always	Often	Seldom	Never
Tactile ASL (TASL) (Visual ASL communicated via touch, including environmental information)	78.1% (N=521)	30.1% (N=201)	48.0% (N=320)	14.8% (N=99)	7.0% (N=47)
ASL (Visual, gestural language)	79.3% (N=529)	30.0% (N=200)	49.3% (N=329)	15.3% (N=102)	5.4% (N=36)
Protactile ASL (PTASL) (Tactile language using receiver's body to convey linguistic information and emotions; sociocultural movement developed in the DeafBlind community)	30.0% (N=200)	9.3% (N=62)	20.7% (N=138)	29.7% (N=198)	40.3% (N=269)
Haptics/Touch Signals (Nonverbal communication using touch with a set inventory of symbols)	15.0% (N=100)	3.1% (N=21)	11.8% (N=79)	23.5% (N=157)	61.5% (N=410)
Tracking (DeafBlind individual holds the signer's wrists or elbows to better follow ("track") their signing)	35.7% (N=238)	7.3% (N=49)	28.3% (N=189)	38.8% (N=259)	25.5% (N=170)
Sim-Com/Sign-supported speech	14.4% (N=96)	2.7% (N=18)	11.7% (N=78)	29.5% (N=197)	56.1% (N=374)
Other	6.4% (N=43)	1.3% (N=9)	5.1% (N=34)	10.6% (N=71)	82.9% (N=553)

A follow-up question asked respondents which modalities they used when interpreting for DeafBlind individuals. Such communication modes were close vision ASL, printing on palm, English/voice, and a wide variety of techniques such as variations on tactile or fingerspelling. They are listed below:

- Close vision ASL, includes smaller signing space; finger spelling, etc. (12)
- Print on palm (12)
- English/voice (9)
- Sign Language/Tactile (8)
- Rochester fingerspelling (7)
- Braille/other close captioning devices (7)
- Drawing/pictures (6)

- Assistive Listening Technologies/FM/Spoken English (6)
- All of the above from given list (5)
- Rochester tactile/Tactile Fingerspelling (4)
- Gestures, body language (3)
- Written (3)
- Lip Reading (3)
- Protactile ASL (3)
- Manipulatives (2)
- Other (2)
- Cues (2)
- ASL (1)
- Tactile ASL (1)
- Various, whatever works (1)
- Nothing (10)

Training for DeafBlind Interpreting

Among DeafBlind interpreters who indicated the use of any communication modality, the majority (72.0%; N=472) learned these skills from DeafBlind individuals. Nearly two in three (64.3%; N=422) learned their skills from conferences or workshops specific to working with DeafBlind individuals. Half (51.1%; N=335) indicated they learned with experienced DeafBlind interpreters. Over one in four (29.3%; N=192) stated that they had protactile ASL training.

Table 15. Learning of Communication Skills to Interpret for DeafBlind

Learning Resource Base: Indicated Use of Any Communication Modality for DeafBlind Interpreting (N=656) (Multiple responses allowed)	Percent	Count
From DeafBlind individuals [e.g., family, friends, mentors, educators]	72.0	472
Workshops/conferences specific to working with DeafBlind individuals	64.3	422
With experienced DeafBlind interpreters	51.1	335
Interpreter Education Program	39.9	262
Protactile ASL Training	29.3	192
ASL coursework	24.4	160
I am a heritage (native) ASL signer	23.6	155
Private training program	10.2	67
No formal training	5.2	34

Interpreter Training Program

Two hundred fifty-five respondents named 107 different programs where they received their education. A respondent could name multiple training programs. Of the 107 unique programs, 49 (45.7%) were mentioned more than once, with Seattle Central Community College (a program that is no longer available) being mentioned most often. The five most attended programs were:

Program	Count
ITP (program not specified)	21
Seattle Central CC ITP	17
Western Oregon University CC ITP	15
University of Georgia Perimeter College	8
Gallaudet University	7

Three in five individuals (59.5%; N=154) who indicated they learned their interpreting skills from an Interpreter Training Program received specific coursework related to DeafBlind interpreting and DeafBlind culture. Overall, respondents reported that this coursework consisted of one dedicated DeafBlind interpreting course or it was a component of a required specialization course:

- 1 dedicated DeafBlind Culture/interpreting course (39.0%; N=60)
- A component of a required specialization course (27.3%; N=42)
- Isolated lecture/workshop (18.8%; N=29)
- 2 or more dedicated DeafBlind Culture/interpreting courses (14.9%; N=23)

Over one-third (36.4%; N=56) also reported that their coursework included a DeafBlind instructor. In addition, nearly half (47.4%; N=72) stated their coursework included an internship or other in-depth experience working with people who are DeafBlind. Out of these, 59 respondents reported the hours spent on this internship or experience. On average, such an internship or specialized experience demanded 68 hours (68.2), with some requiring just ten or fewer hours (18.6%; N=11) and others running as high as 200 to 400 hours (8.5%; N=5). The respondents mentioned 38 different DeafBlind instructors from their coursework. Of these instructors, the vast majority (76.3%) were mentioned once, and only four individuals were mentioned more than twice. The instructors who trained multiple people within a traditional coursework setting were:

Instructor	Count
aj granda	8
Patrick Cave	6
Jelica Nuccio	5
Isabel Florence	3

Protactile ASL Program

One hundred thirty-three different trainings/groups of trainers were named by the respondents, with the combination of aj granda and Jelica Nuccio providing by far the greatest number of trainings (44 out of 133; 33.1%). The next most frequently mentioned trainer was aj granda, providing training alone at six mentions. When breaking the trainings down to the individual

trainers involved, again aj granda and Jelica Nuccio provide the highest number of trainings with 63 and 61, respectively. The most often mentioned protactile ASL training providers were:

Protactile ASL Training Provider	Count
aj granda	63
Jelica Nuccio	61
Bryen Yunashko	11
Jamie Pope	10
Hayley Broadway	9

Private Training Program

Among the 67 respondents who indicated they learned their interpreting skills though a private training program, 56 provided an estimate of the length of their program. This ranged from a half day of training to one year of tutoring, involving online training as well as week-long immersions.

Sixty-one respondents answered the question about where they received private training, with 12 respondents unable to remember. Of the 49 other responses, only two—HKNC (40.8%; N=20) and SSP (4.1%; N=2)—were mentioned more than once; the other 27 training programs were mentioned only once.

There were 38 unique private training sessions and 37 unique trainers cited by the respondents. The vast majority (72.9%) of the trainers provided a single private training. Of those that provided multiple trainings, only 8 provided more than two, and the highest number an individual provided was 5.

Private Training Provider	Count
Susanne Morgan Morrow	5
Maricar Marquez	4
Jelica Nuccio	4
Ashley Benton	4
Marilyn Trader	3

Workshops/Conferences

The respondents named 405 different conferences/workshops where they had received protactile ASL training. The American Association of the DeafBlind conferences were cited most often (6%; N=24) as the location/organization that provided training. A general response of Registry of Interpreters for the Deaf (RID) was the second (4%; N=18) most cited location for receiving training. However, if RID is broadened to include the network of regions and state-affiliated chapters, it becomes by far the largest location that respondents received training at 85 (20%) responses.

Appendix A provides the full lists of all training programs, trainers, and workshops/conferences mentioned in these open-ended questions.

Skills and Knowledge When Working with DeafBlind

DeafBlind interpreters were asked to assess their ability to incorporate specific skills and knowledge into their work with DeafBlind individuals. Using a scale from 1 (no skill) to 10 (proficient), respondents tended to rate themselves highest on their understanding of the ADA in regard to interpreting access. Understanding of assistive listening devices was rated lower. Intervenor skills – working with children in schools – was rated very low (average of 3.4).

Table 16. Ability to Incorporate Skills/Knowledge into Work with DeafBlind People

Skill Base: Interpreted for DeafBlind (N=630) *Scale: 1 (No Skill) to 10 (Proficient)*	Average
Understanding of the ADA in regard to interpreting access	7.9
Ability to describe environment	7.1
Support Service Provider skills (human/sighted guide techniques)	7.0
Understanding of DeafBlind Culture	6.8
Orientation and Mobility	6.7
Communication Facilitator skills (i.e., in-person phone call assistance and interpreting)	6.5
Understanding of assistive listening technologies	5.9
Intervenor skills (working with children in schools)	3.4

Future Contact and Interest in Training Among Respondents

Future Contact

Nearly three in four (72.1%; N=471) respondents agreed to future contact from the DeafBlind Interpreting National Training and Resource Center. One-third (34.3%; N=224) agreed to have their contact information added to the shared interpreting grants general interest mailing list, while slightly more (37.8%; N=247) agreed that they could be contacted again in the future about DeafBlind interpreting.

Table 17. Future Contact

Response (N=653)	Percent	Count
Ok to contact (Net)	72.1	471
Ok to contact in future about DeafBlind Interpreting	37.8	247
Ok to contact about DeafBlind interpreting AND add information to shared interpreting grants general interest mailing list	34.3	224
Do not add to mailing list and use information only to validate data	27.9	182

National Directory of Deaf Blind Interpreters

Three in five DeafBlind interpreters (61.0%; N=379) are interested in joining a national directory of DeafBlind interpreters (see Figure 5).

Figure 5: Interest in Joining National Directory of DeafBlind Interpreters
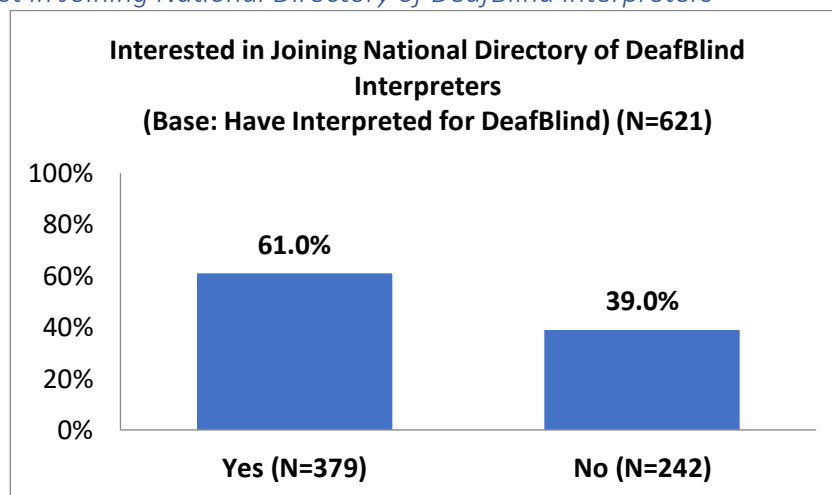
Clearly, interest in joining the National Directory of DeafBlind Interpreters is very high among those interpreters who consider themselves as having proficient skills (76.6%: N=190). Over half of those with intermediate skills also express interest in joining (61.0%; N=155). (See Figure 6.)

Figure 6. Interest in Joining National Directory of DeafBlind Interpreters by Skill Level

Interested in Joining National Directory of DeafBlind Interpreters
(Base: Have Interpreted for DeafBlind) (N=621)

Skill Level	Interest
Novice (N=119)	28.6%
Intermediate (N=254)	61.0%
Proficient (N=248)	76.6%
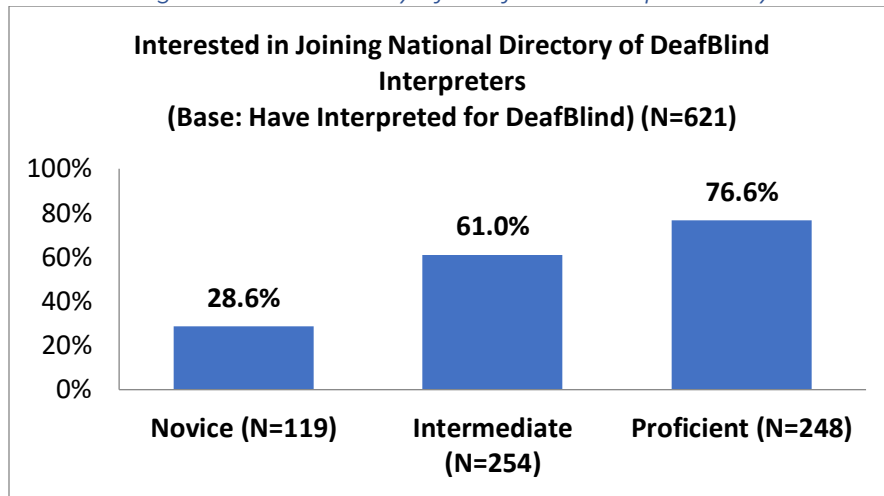
Interest in Protactile American Sign Language (PTASL) Training

Nearly nine in ten respondents (86.4%; N=586) say they are interested in receiving protactile American Sign Language (PTASL) training. Interest is especially high among those who know a little about PTASL already (58.3%; N=395).

Figure 7. Interest in Protactile American Sign Language (PTASL)

Interest in PTASL Training
(N=678)

Category	Percent
Net Interested	86.4%
I am already skilled in PTASL and I am not interested (N=10)	1.5%
I am already skilled in PTASL but I am still interested (N=99)	14.6%
I know a little about PTASL but I am not interested (N=58)	8.6%
I know a little about PTASL and I would be interested (N=395)	58.3%
I have not heard of PTASL before and I am not interested (N=24)	3.5%
I have not heard of PTASL before but I am now interested (N=92)	13.6%

While just a small percentage of total survey respondents, those who have never interpreted for DeafBlind people because they have no training in this area or because they feel intimidated by DeafBlind individuals' needs (N=40), fully three-fourths (75.0%) say they are interested in receiving PTASL training.

Survey Invitation

Invitation Sources

By far, respondents indicated that they received their survey invitation through an email from the DeafBlind Interpreting National Resource Center (DBI) (56.2%; N=381). One in four (23.3%; N=158) was referred by others to the survey link, while another 15 respondents (2.2%) mentioned specific people who referred them. Another 13.1% received their survey invitation via an organization, company, or agency.

Table 18. Survey Invitation Received

Invitation Source (N=678) (Multiple responses allowed)	Percent	Count
Email from the DeafBlind Interpreting National Training and Resource Center (DBI)	56.2	381
Somebody referred me to a link to this survey	23.3	158
Organization/Company/Agency	13.1	89
DBI Facebook Page	6.3	43
Another Facebook group/page	5.8	39
RID	5.6	38
RID: DeafBlind Member Section	2.5	17
Email from National Center on DeafBlindness	2.4	16
Specific people	2.2	15
The DeafBlind Interpreting website	1.9	13
PSDBC Listserv (Professionals serving DeafBlind Consumers)	1.8	12
Email	0.7	5
Email from National Clearinghouse of Rehabilitation Training Materials	0.4	3
Twitter	0.1	1

Other Facebook pages that were mentioned included:
- Specific organizations, such as DeafBlind Living Well Services (16)
- RID (7)
- Seabeck DeafBlind Retreat (4)
- CM Hall's page, the Co-Director of the National DeafBlind Interpreting Center (3)
- Other (7)

Conclusion

The information summarized in this report will help guide the building of a PTASL DeafBlind Interpreters Training program to address the needs of the DeafBlind community. As has been demonstrated, the skills of self-identified interpreters vary widely, spanning from no experience/education to those interpreters that have extensive knowledge, skills, and education. It is not surprising that states with larger populations also have larger interpreter populations, but states whose populations fall into the lower 50% percentile also have relatively large interpreter populations. This indicates that there are areas that may be oversaturated with interpreters, while other locations could be viewed as deserts and the needs of the DeafBlind residents within the area may not be met. As one of the main reasons stated for not interpreting for DeafBlind people is a lack of opportunity (i.e., no DeafBlind people in the area or no knowledge of them) to do so, it is important to match the geographic area of individuals in need of interpreting services and trained interpreters to serve them. The data also point to where the gaps in education and experience of the interpreters exist; there are certain vocations and locations that could benefit from increased training opportunities that could greatly help this community.

Section 3: Focus Groups and Interviews

2017
Prepared by:
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CM Hall

Overview

The materials presented here on interpreting with DeafBlind people are intended for interpreters and interpreter educators, as well as for DeafBlind people seeking resources on advocacy and working with interpreters. There is also information useful to researchers, interpreter coordinators, vocational rehabilitation specialists, and others seeking to increase their knowledge in this area.

This document is available in electronic format on the DBI website at www.dbinterpreting.org. It can also be found in the DBI digital repository online at http://digitalcommons.wou.edu/dbi, and in the NCDB Library.

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Executive Summary

A major component of the DBI 2017 *Needs Assessment* was the use of focus groups and interviews to advance the identification of the competencies necessary to effectively interpret for DeafBlind individuals. To ensure a wide range of participation, and to address some of the systemic barriers to DeafBlind and Deaf people's access to online survey tools in written English, focus groups and interviews were a means to invite participation, either in-person or via teleconference.

In total, 77 stakeholders participated in this *Needs Assessment* activity. Their responses supported the relevancy of the identified competencies but also revealed that the competencies were often not visible to interpreters working in this specialization. More specifically, the following competencies were confirmed. In most, but not call cases, the list below is listed in order of importance.

Identified Competencies
1. Respect for DeafBlind individuals' autonomy - making their own decisions.
2. An understanding of the different interpreting demands between visual ASL and tactile ASL (e.g., adding visual or audio description of the visual environment)
3. Knowledge of different types of communication options and techniques needed for tactile communication, and the ability to match an individual's language preference (signed languages, close vision/tactile, haptics)
4. Fluency in ASL, TASL, and PTASL
5. Respect for diversity in the DeafBlind community
6. Knowledge and understanding of hearing loss and vision loss
7. Knowledge and understanding of accessibility and how to use various technologies (e.g., ALDs, visual description, orientation and mobility
8. Familiarity with vocational rehabilitation and its various settings/community partners (e.g., appointments, job shadowing, job coaching, on the job training, job interviews, career counseling)

Methodology

The primary goal of the focus groups and interviews was to ascertain if the eight identified competencies established in the *Annotated Bibliography* and *Baseline Survey* resonated with stakeholders allied to DeafBlind individuals. To this end, stakeholders were asked to review each competency statement and share whether the competency was important to the stakeholder, and how often the stakeholder observed interpreters demonstrating the competency.

Stakeholder Groups

Eight discrete stakeholder groups participated in a focus group or an interview. DBI staff took specific measures to solicit participation and feedback from each group. The stakeholder groups included the following:

- Deaf interpreters
- Interpreter educators (Deaf, DeafBlind or Hearing)
- Hearing interpreters
- DeafBlind individuals
- DeafBlind content experts (Hearing, Deaf, DeafBlind)
- DeafBlind advocacy agency personnel (Hearing, Deaf, DeafBlind)
- Vocational rehabilitation professionals who specialize with Deaf/DeafBlind clients
- Interpreter referral agencies

This range of stakeholders ensured that not only were the opinions of the practitioners considered, but also interpreter educators and content experts, and the DeafBlind people who use and hire their services. For purposes of recruitment, specific criteria were assigned to each stakeholder group (Table 1). It should be noted that despite targeted recruitment efforts, there was no representation from interpreter referral agencies in either the focus groups or interviews.

Table 1: Stakeholder Definitions and Criteria for Participation in Focus Group or Interview Study

Stakeholder	Definition/Criteria
DeafBlind Individual	A person who has a combined vision and hearing loss
DeafBlind Content Expert	A person who has expertise and experience working with individuals who are DeafBlind
Deaf Interpreter Educators	A person who is Deaf, deaf, or hard of hearing, who teaches and trains interpreters to work with DeafBlind individuals
Hearing Interpreters	A person who is hearing, who provides interpretation to DeafBlind individuals
Deaf Interpreters/Educators	An interpreter, or interpreter educator, who is Deaf, deaf, or hard of hearing, who provides interpretation to DeafBlind individuals

Stakeholder	Definition/Criteria
Hearing Interpreters/Educators	An interpreter, or interpreter educator, who is hearing, who provides interpretation to DeafBlind individuals
VR Counselor/Vendor/Interpreter	A professional who works in Vocational Rehabilitation and who experience working with DeafBlind consumers
DeafBlind Advocacy Agency Personnel	A person who works for an advocacy agency and who has experience advising on provision of interpreters for DeafBlind individuals

Focus Groups

The great advantage to conducting focus groups as a qualitative research method is the ability to garner more in-depth insights into the competencies as based on the feelings and experiences of the participants. Moreover, they provide a mechanism for participants to discuss a larger range of issues that cannot be fully captured by a questionnaire. DBI staff recognize that success in this research genre is largely dependent on the ability of participants to communicate openly and freely, and to do this they must feel they are in a safe environment (Edmunds, 1999). Use of focus groups and interviews was important because the primary survey instrument was conducted online in written English, a tool widely recognized as restrictive for Deaf respondents whose first language is not English.

To create a safe environment in which to communicate freely, focus groups were configured homogeneously. This approach provided an opportunity for a diverse and varied mix of individuals who otherwise might be reluctant to share or disagree with more experienced participants—such as Deaf interpreters in a focus group with hearing interpreters, or hard of hearing/Blind or low vision individuals in a room with sign language-using DeafBlind individuals— to share thoughts, feelings, and anecdotes. Table 2 reflects the focus group configuration. Focus groups took place onsite at conferences and events, as well as online and via teleconference. Using this approach allowed DBI to draw from for a wider pool of candidates from around the country, including individuals from more remote areas, rather than a specific geographic region.

In total, nine focus groups were completed, but not all groups were asked to systematically rank the eight competencies presented. Rather, facilitators attempted to draw out more anecdotal experiences using the competencies as prompts for stories and examples. While no demographic data was collected, the composition of the focus groups was varied and reflected vision/hearing loss, career status, racial, ethnic, age and geographic diversity, as well as LGBTQ identities.

Focus Groups Conducted

GROUP #1: REHABILITATION PERSONNEL

The first focus group was conducted by Heather Holmes, DBI Co-Director (Hearing/Sighted), in May 2017 with a mix of DeafBlind, Deaf and hearing participants attending the national American Deafness and Rehabilitation Association (ADARA) conference held in Portland, Oregon. Twelve representatives from the field of vocational rehabilitation included 3 hearing, 7 Deaf, and 2 DeafBlind individuals. Of this group, one male participant and 11 females were present. Among those who participated were professional VR counselors, case managers, one person who worked for Helen Keller National Center, Deaf and hearing interpreters who worked with DeafBlind individuals, and one person who worked as a DeafBlind specialist. The focus group was conducted in ASL with spoken language interpreters voice interpreting for access.

GROUPS #2 – 4: DEAFBLIND INDIVIDUALS

Three additional focus groups were conducted in August 2017 at the Lighthouse for the Blind's annual DeafBlind retreat, known as "Seabeck," located in Seabeck, WA. Participants for these three groups were DeafBlind, however participants were separated out into groups who use sign language and those who are hard of hearing and low vision or Blind. Two focus group were facilitated in American Sign Language. Participants were sign language users or utilized tactile ASL interpreters. These focus groups included 4 men and 2 women. In the third focus group, 3 female hard of hearing participants responded in spoken English, while the DeafBlind facilitator utilized sign language interpreters.

Recruitment efforts for participants included an advance email to the approximately 80 individuals who attended Seabeck, as well as daily announcements and a flyer in the packet of each registrant. Focus groups were limited to 4 participants per group. Roberto Cabrera, a DBI core team member, who is also a VR counselor, DeafBlind, and a sign language user, facilitated each focus group.

GROUPS #5 – 6: DEAF INTERPRETERS/INTERPRETER EDUCATORS:

Focus groups were also conducted via video in October 2017 on the Zoom platform. These focus groups were facilitated by Ian Guzman Aranda, a Deaf interpreter who frequently works in DeafBlind settings. Chad A. Ludwig, a Deaf interpreter served as notetaker for the sessions. Geared toward Deaf interpreters currently engaged in service provision with DeafBlind individuals, as well as Deaf interpreter educators, participants included one female and three males. The recruitment effort for interpreters included a national email via DBI's Constant Contact email distribution list and several Facebook pages (i.e., Seabeck DeafBlind Retreat, the RID DeafBlind Member Section, and Certified Deaf Interpreter groups).

GROUPS #7 – 8: HEARING INTERPRETERS/INTERPRETER EDUCATORS:

The fourth set of focus groups were conducted via audio phone conference in October 2017 on FreeConference.com. Three focus groups geared for hearing interpreters currently engaged in service provision with DeafBlind individuals, as well as with hearing interpreter educators were facilitated by CM Hall, DBI Co-Director (Hearing/Sighted). These focus groups totaled 9 hearing participants, all female. The recruitment effort for interpreters included a national email via the Constant Contact email distribution list and several Facebook pages including the Seabeck DeafBlind Retreat, the RID DeafBlind Member Section, and the SSPs/Interpreters/Interveners groups.

Interviews

Once the *Competencies Survey* had officially closed, interviews were conducted with recognized experts in this field of specializations. The purpose of this activity was to compare the KABS deemed important by practitioners who interpret on a daily basis against those of the experts who shape the field (e.g., educators, leaders, etc.). The design of this activity was qualitative rather than quantitative in nature.

Methodology

With the goal of "drilling down" further, participants were asked to complete an in-depth online interview form assessing the identified competencies required of DeafBlind interpreters. 150 stakeholders were invited to participate. The experts were drawn from a predetermined list that included referrals by members of the DBI Core Team, entities who submitted letters of intent or support when the DBI grant was first being constructed, and by personal invitation. Of the 150 invitations, 41 experts completed an interview.

Table 2: Focus Group and Interview Participant Overview

Group	Stakeholder Domain Cluster (Total Participants)	Location	Date	Participants
1	Mixed: VR counselors, case managers, DeafBlind interpreters, DeafBlind specialist, Deaf interpreters, hearing interpreters (12)	Focus Group: ADARA Conference	May 25, 2017	12
2	DeafBlind Consumers (7)	Focus Group: Seabeck	August 29, 2017	4
3	DeafBlind Consumers (7)	Focus Group: Seabeck	August 29, 2017	2
4	DeafBlind Consumers (7)	Interview: Seabeck	August 29, 2017	1
5	Hard of Hearing (DeafBlind Consumers) (3)	Focus Group: Seabeck	August 29, 2017	3
6	DeafBlind Content Experts (9)	Asynchronous Interview	October 20, 2017	9
7	DeafBlind Interpreter Educator (1)	Asynchronous Interview	October 20, 2017	1
8	Deaf Interpreters/ Interpreter Educators (14)	Focus Group: Videoconference	October 9, 2017	2
9	Deaf Interpreters/ Interpreter Educators (14)	Focus Group: Videoconference	October 10, 2017	2
10	Deaf Interpreters/ Interpreter Educators (14)	Interview: Videoconference	October 12, 2017	1
11	Deaf Interpreters/ Interpreter Educators (14)	Asynchronous Interviews	October 1, 2017	9
12	Hearing Interpreters/Educators (22)	Focus Group: Teleconference	October 10, 2017	3
13	Hearing Interpreters/Educators (22)	Focus Group: Teleconference	October 11, 2017	3
14	Hearing Interpreters/Educators (22)	Focus Group: Teleconference	October 12, 2017	3

Group	Stakeholder Domain Cluster (Total Participants)	Location	Date	Participants
15	Hearing Interpreters/Educators (22)	Asynchronous Interviews	October 1, 2017	13
16	DeafBlind Advocacy Agency Personnel (6)	Asynchronous Interviews	October 20, 2017	6
17	Vocational Rehabilitation Counselors (3)	Asynchronous Interviews	October 20, 2017	3

Key Findings and Themes

Key Findings and Themes Across Stakeholder Groups

When possible, focus group participants were asked to rate on a scale of 1 -10 the importance of the eight competencies, with 10 being the most important. A number of key themes also emerged from these final two activities of the *Needs Assessment.*

Many common themes emerged across all stakeholder groups. Among them:
- Autonomy is the highest priority and often requires interpreters to understand how to give up power so DeafBlind people can be more autonomous
- Interpreters must be involved in the DeafBlind community
- Interpreters must be flexible, adaptable, and willing to make adjustments
- Interpreters must be comfortable with varying degrees of touch
- A respect for varying communication styles is essential
- Interpreters must be willing to disclose which languages they are fluent/proficient in using (VASL, TASL, PTASL, ASL, PSE)
- More skill in how to work with people who are hard of hearing and have low vision is essential for a competent interpreter
- Teamwork is really important
- Not everyone likes tactile or PTASL, so it's important to be impartial and allow people to communicate the way that is most comfortable for them
- More training is needed: infused in IEP curriculum, workshops, and classes
- A certification in DeafBlind interpreting should be a priority
- It is offensive when interpreters say, "I don't do tactile" as a blanket statement
- Specialized knowledge allows for more effective communication and less frustrations (technology, braille, mobility)
- Specialty areas should be addressed (VR, medical, legal, educational)
- Understanding the fundamentals of hearing and vision loss is important
- Knowledge of the VR system is important
- Many DeafBlind interpreters are not qualified and/or highly trained to work with Deafblind individuals

We also noticed that some themes seemed to appear only in certain stakeholder groups. Those themes and their prevalence within stakeholder groups are listed in Table 3.

Table 3: Key Themes Across Stakeholder Groups

Key Theme	Deaf interpreters	Hearing interpreters	Interpreter educators	DeafBlind individuals	DeafBlind Content Experts	DeafBlind Advocacy Agency Personnel	Vocational Rehabilitation professionals
Physical stamina is important when considering working as a DeafBlind interpreter		X	X	X	X		X
Understanding assistive technology is important because it supports communication needs		X	X	X	X	X	X
DeafBlind individuals should be allowed to use their preferred interpreters- it makes everything more streamlined	X			X	X	X	X
There is a strong need for mentorship and feedback for interpreters	X	X	X	X			
There needs to be more clarification around the roles of SSPs and DeafBlind Interpreters	X						
DeafBlind culture is not the same as Deaf culture. It is unique and needs to be respected.	X	X		X	X		
It is not appropriate to ask a person about the degree of their hearing/vision loss (e.g., how much can you see/how much can you hear)	X	X		X	X		
Recognition of hearing and/or sighted privilege is important	X						
DeafBlind interpreting requires managing greater demands/ can be difficult to know what information to drop or filter	X	X					

Key Theme	Deaf interpreters	Hearing interpreters	Interpreter educators	DeafBlind individuals	DeafBlind Content Experts	DeafBlind Advocacy Agency Personnel	Vocational Rehabilitation professionals
Interpreting agencies send unqualified interpreters because they don't know what DeafBlind individuals need				▉	▉		
Don't send new interpreters to interpret for DeafBlind consumers.				▉			
Everything takes longer when working with DeafBlind individuals, so it is important to plan for this in advance	▉	▉	▉			▉	▉

Key Themes Across Competencies

Table 4 lists key themes as they relate to the identified competencies.

Table 4: Key Themes Across Competencies

Key Themes	Competencies
Autonomy is the highest priority and often requires interpreters to understand how to give up power so DeafBlind people can be more autonomous	1
Must be involved in the DeafBlind community	5
Must be flexible, adaptable, and willing to make adjustments	3, 5
Must be comfortable with varying degrees of touch	3
Respect for varying communication styles is essential	3, 5
Interpreters must be willing to disclose which languages they are fluent/proficient in using (VASL, TASL, PTASL, ASL, PSE)	3, 4
More skill in how to work with people who are hard of hearing and have low vision	3,7
Physical stamina is important when considering working as a DeafBlind interpreter	2
Teamwork is really important	1, 2
Understanding assistive technology is important because it supports communication needs	7
Not everyone likes tactile or PTASL, so it's important to be impartial and allow people to communicate the way that is most comfortable for them	3, 5
More training is needed: infused in IEP curriculum, workshops, and classes	1,2,3,4,5,6,7,8
A certification in DeafBlind interpreting should be a priority	1,2,3,4,5,6,7,8
It is offensive when interpreters say, "I don't do tactile" as a blanket statement	3, 5
DeafBlind individuals should be allowed to use their preferred interpreters- it makes everything more streamlined	1, 5
There is a strong need for mentorship and feedback for interpreters	1,4,5
There needs to be more clarification around the roles of SSPs and DeafBlind Interpreters	3, 7
Specialized knowledge allows for more effective communication and less frustrations (technology, braille, mobility) just some introductory content knowledge	6,7,8

Key Themes	Competencies
Specialty areas should be addressed (VR, medical, legal, educational)	6,7,8
DeafBlind culture is not the same as Deaf culture. It is unique and needs to be respected.	1, 5
It is not appropriate to ask a person about the degree of their hearing/vision loss (e.g., how much can you see/how much can you hear)	5
Understanding the fundamentals of hearing and vision loss is important	6
Recognition of hearing and/or sighted privilege is important	?
Knowledge of the VR system is important	8
DeafBlind interpreting requires managing greater demands/ can be difficult to know what information to drop or filter	2
Interpreting agencies send unqualified interpreters because they don't know what DeafBlind individuals need	2,3,4,7
Many DeafBlind interpreters are not qualified and/or highly trained to work with Deafblind individuals	2,3,4,5,6,7
Don't send new interpreters to interpret for DeafBlind consumers.	4
Everything takes longer when working with DeafBlind individuals, so it is important to plan for this in advance	1

Next Steps

The focus groups and interviews were the two of the last activities of the 2017 *DBI Needs Assessment*. The findings of these activities reinforced the findings of the preceding *Needs Assessment* findings, which captured 1,704 survey responses. Collectively, the *Needs Assessment* data identified a number of *Key Findings* that guided the construction of a slate of *Domains and Competencies* that should be demonstrated by every practitioner interpreting for DeafBlind individuals. The *Key Findings* and *Domains and Competencies* are described in Sections 6 and 7 of the *Report*. The final activity of the *Needs Assessment* entailed the vetting of the *Domains and Competencies.*

References

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Section 4: Competencies Survey

2017
Prepared by:
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Patrick Aldrich

Overview

The materials presented here on interpreting with DeafBlind people are intended for interpreters and interpreter educators, as well as for DeafBlind people seeking resources on advocacy and working with interpreters. There is also information useful to researchers, interpreter coordinators, vocational rehabilitation specialists, and others seeking to increase their knowledge in this area.

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Executive Summary

An online survey of 612 respondents conducted in October of 2017 assessed the perceived importance of eight competencies related to DeafBlind interpreting and the extent to which DeafBlind interpreters demonstrate these competencies on a regular basis.

These eight competencies present various skills and knowledge related to DeafBlind interpreting:
- Respect for DeafBlind individuals' autonomy - making their own decisions
- An understanding of the different interpreting demands between visual ASL and tactile ASL (e.g., adding visual or audio description of the visual environment)
- Knowledge of different types of communication options and techniques needed for tactile communication, and the ability to match an individual's language preference (signed languages, close vision/tactile, haptics)
- Fluency in ASL, TASL, and PTASL
- Respect for diversity in the DeafBlind community
- Knowledge and understanding of hearing loss and vision loss
- Knowledge and understanding of accessibility and how to use various technologies (e.g., ALDs, visual description, orientation and mobility)
- Familiarity with vocational rehabilitation and its various settings/community partners (e.g., appointments, job shadowing, job coaching, on the job training, job interviews, career counseling)

In general, all eight competencies are viewed as important. None of them is regarded as unimportant although there is some distinction between them. Overall, *Respect for DeafBlind individuals' autonomy* was rated as very important by nine in ten respondents. In addition, it is also the highest ranked competency in terms of importance. In a related question, when asked to identify the most important skill to have as a DeafBlind interpreter, over one in four selected respect. However, only one in three felt that this competency is demonstrated by DeafBlind interpreters either almost always or very often.

Similarly, the remaining seven competencies were rated as important, with about four in five rating both *Knowledge of different types of communication options and techniques for tactile communication* and *Respect for diversity in the DeafBlind community* as very important. Both were subsequently ranked high in importance amongst the eight competencies. Once again, though, respondents did not see these competencies occurring frequently in DeafBlind interpreters.

The *rankings* in terms of importance for the eight competencies are below, together with the proportion of respondents ranking them highest. As these somewhat low proportions demonstrate, (for example, just 29.8% of respondents ranked *Respect for DeafBlind Individuals' Autonomy* as the most important competency), respondents were divided about which competency to rank highest in terms of importance as they viewed them all as important skills to have. Rankings therefore varied from '1' (highest) to '8' (lowest) for the competencies. One notable exception is *Familiarity with vocational rehabilitation* where fully half of respondents ranked this as the least important competency. Only one-third rated it as very important.

- Respect for DeafBlind individuals' autonomy - making their own decisions -29.8%
- Familiarity with vocational rehabilitation and its various settings/community partners – 14.7%
- Knowledge of different types of communication options and techniques needed for tactile communication, and the ability to match an individual's language preference - 14.7%
- Fluency in ASL, TASL, and PTASL – 13.5%
- Respect for diversity in the DeafBlind community – 11.0%
- Knowledge and understanding of hearing loss and vision loss – 9.9%
- An understanding of the different interpreting demands between visual ASL and tactile ASL – 3.4%
- Knowledge and understanding of accessibility and how to use various technologies - 3.0%

While *Fluency of ASL, TASL, and PTASL* is seen as important overall, only 13.5% ranked it highest among the eight competencies. In a related question, however, two in five viewed knowledge of tactile/protactile ASL as the most important skill a DeafBlind interpreter should possess.

About two in five DeafBlind interpreters received formal training for DeafBlind interpreting through an Interpreter Training Program, and the remaining interpreters trained via workshops, conferences, or working with DeafBlind community members or other experienced DeafBlind interpreters. Subsequently, only about one-third are satisfied with their training. Among those who expressed dissatisfaction, nearly all are interested in additional training.

As these eight competencies are viewed as important for DeafBlind interpreting and training for DeafBlind interpreting has been found lacking, this is a clear indication that additional training focusing on these competencies would be of high benefit to the interpreter community as well as the DeafBlind community.

Survey Background

The DeafBlind Interpreting National Training and Resource Center (DBI) conducted a needs assessment survey to assess how DeafBlind interpreters and other stakeholders rate and assess eight competencies of DeafBlind interpreters. The survey invitation was sent to all members of the DeafBlind Member Section of the Registry of Interpreters for the Deaf, and the Professionals Serving DeafBlind Consumers email distribution list. Additionally, the survey invitation was distributed via the following Facebook groups and pages:

- DBI
- Discover Interpreting
- NTFDBI, the National Task Force on DeafBlind Interpreting
- Registry of Interpreters for the Deaf
- Certified Deaf Interpreter
- Support Service Providers for our DeafBlind Community
- Seabeck DeafBlind Retreat
- State Coordinators of the Deaf Listserv
- The National Clearinghouse of Rehabilitation Training Materials
- The Regional Resource Center on Deafness at Western Oregon University

Online responses were captured using the Qualtrics survey platform. The survey opened on Tuesday, October 3rd and closed on Sunday, October 15th, 2017. An informed consent page explained the background and purpose of the survey; respondents who agreed to the terms were subsequently able to participate in the survey.

A total of 690 survey responses were collected. During the database preparation, two (2) respondents failed to agree to the consent form. Another 27 responses were completed by respondents residing outside of the United States; therefore, the respondents were also sent to the "thank you" page without answering any more questions. An additional 49 responses were deleted as the respondents answered only the first question. **The final database contains 612 responses**. As some questions were voluntary and other questions were based on specific previous survey answers (meaning respondents had to answer in a specific way to a previous question to see a follow-up question), respondents did not complete all questions; some also dropped out before they finished the survey.

All percentages given are based on those who answered the specific question. Percentages may not add to 100% due to rounding. In questions with multiple responses, percentages do not add up to 100%.

The Research Institute (TRI) at Western Oregon University provided survey setup, online hosting services, and data analyses as well as reporting for this survey. Staff members of TRI include Sybille Guy, Ph.D., Center Director for the Center on Research, Analysis & Evaluation (CREA), and Patrick Aldrich, M.S., Statistician.

Relationship to Deaf Blind Interpreting

Identity with Regard to Hearing/Vision

By far, the majority of respondents (73.7%; N=451) identified as Hearing/Sighted. Nearly one in five (18.1%; N=111) identified as Deaf/Sighted. Only 20 respondents (3.3%) identified as DeafBlind.

Table 1. Identity with Regards to Hearing/Vision

Identity (N=612)	Percent	Count
DeafBlind	3.3	20
Deaf/Sighted	18.1	111
Deaf/Low Vision	0.7	4
Hard of Hearing/Sighted	3.3	20
Hard of Hearing/Low Vision	0.7	4
Hard of Hearing/Blind	0.2	1
Hearing/Sighted	73.7	451
Hearing/Low Vision	0.2	1
Hearing/Blind	0.0	0

Primary Relationship to DeafBlind Interpreting

About seven in ten respondents (72.1%; N=440) stated that their primary relationship to DeafBlind interpreting is the role of an interpreter (not necessarily for the DeafBlind community). Support Service Providers[1] were the second largest group, with 7.4% (N=45) of respondents identifying as such. For some respondents who indicated "Other" as their primary role and then further specified their role, answers fit actual survey response options and were therefore incorporated into those. This also included some respondents who indicated multiple roles in their open-ended responses (2.6%; N=16).

Table 2: Primary Relationship to DeafBlind Interpreting

Primary Relationship (N=610)	Percent	Count
Interpreter (Deaf or Hearing)	72.1	440
Support Service Provider (SSP)	7.4	45
DeafBlind Individual	4.1	25
DeafBlind Advocacy Agency Personnel or Service Provider	3.6	22
Family member	3.4	21
Interpreter Educator	2.8	17
VR Counselor	2.5	15
Interpreter Referral Agency Personnel	0.8	5
Teacher of the Deaf/DeafBlind	0.8	5
Other (please specify)	3.3	15

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1 Support Service Provider (SSP): A trained worker who has appropriate communication skills (typically this means at least a minimum level of fluency in sign language) and the ability to guide a blind/DeafBlind person safely as well as skill in providing information about the visual environment.

Competencies (Skills and Knowledge) for DeafBlind Interpreters

Respondents were asked their opinions about the eight competencies (or skills and knowledge) a DeafBlind interpreter should possess. After rating the importance of each competency on a scale from 1 (not important) to 10 (very important), they further indicated how often they see interpreters demonstrating each competency. Lastly, respondents ranked the competencies on a scale from 1 (highest importance) to 8 (lowest importance).

Importance of Competency

Please note that out of the 497 respondents who answered the question on importance and frequency, 81.9% (N=407) are currently working as interpreters while 63.0% (N=313) are also DeafBlind interpreters.

Respect for DeafBlind individuals' autonomy was rated as very important (a '10' on the scale) by nine in ten respondents (89.9%; N=447).

Four in five rated the following competencies as very important:
- Knowledge of different types of communication options and techniques needed for tactile communication, and the ability to match an individual's language preference (signed languages, close vision/tactile, haptics)
- Respect for diversity in the DeafBlind community

By contrast, familiarity with vocational rehabilitation and its various settings/community partners was rated as very important by only one-third (36.2%; N=180), the lowest of all eight competencies.

Table 3. Importance of Competency

Competency Rated 10 (Very Important) (N=497)	Percent	Count
Respect for DeafBlind individuals' autonomy - making their own decisions	89.9	447
Knowledge of different types of communication options and techniques needed for tactile communication, and the ability to match an individual's language preference (signed languages, close vision/tactile, haptics)	81.5	405
Respect for diversity in the DeafBlind community	80.7	401
An understanding of the different interpreting demands between visual ASL and tactile ASL (e.g., adding visual or audio description of the visual environment)	73.0	363
Fluency in ASL, TASL, and PTASL	67.2	334
Knowledge and understanding of hearing loss and vision loss	52.5	261
Knowledge and understanding of accessibility and how to use various technologies (e.g., ALDs, visual description, orientation and mobility)	50.5	251
Familiarity with vocational rehabilitation and its various settings/community partners (e.g., appointments, job shadowing, job coaching, on the job training, job interviews, career counseling)	36.2	180

Table 4 presents the importance ratings in detail for the eight competencies. Average ratings for each competency further demonstrate the importance the respondents attach to each, with a higher average rating expressing higher importance. While there might be some differences in actual ratings of "10" (very important), overall, respondents viewed all eight competencies as important.

Table 4. Importance of Competency – Detailed Results

Competency (N=497)	1	2	3	4	5	6	7	8	9	10	Average Rating
Knowledge and understanding of hearing loss and vision loss	0.6% (N=3)	1.0% (N=5)	0.8% (N=4)	1.2% (N=6)	4.8% (N=24)	4.6% (N=23)	9.5% (N=47)	13.1% (N=65)	11.9% (N=59)	52.5% (N=261)	8.6
Knowledge of different types of communication options and techniques needed for tactile communication and the ability to match an individual's language preference (signed languages, close vision/tactile, haptics)	0.0% (N=0)	0.0% (N=0)	0.0% (N=0)	0.0% (N=0)	1.0% (N=5)	0.4% (N=2)	1.2% (N=6)	3.4% (N=17)	12.5% (N=62)	81.5% (N=405)	9.7
Respect for diversity in the DeafBlind community	0.0% (N=0)	0.2% (N=1)	0.0% (N=0)	0.0% (N=0)	0.2% (N=1)	1.2% (N=6)	2.4% (N=12)	3.4% (N=17)	11.9% (N=59)	80.7% (N=401)	9.7
Respect for DeafBlind individuals' autonomy - making their own decisions	0.0% (N=0)	0.0% (N=0)	0.0% (N=0)	0.0% (N=0)	0.6% (N=3)	0.0% (N=0)	0.4% (N=2)	0.8% (N=4)	8.2% (N=41)	89.9% (N=447)	9.9
Knowledge and understanding of accessibility and how to use various technologies (e.g., ALDs, visual description, orientation and mobility)	0.0% (N=0)	0.2% (N=1)	0.2% (N=1)	1.0% (N=5)	2.4% (N=12)	4.4% (N=22)	8.2% (N=41)	14.7% (N=73)	18.3% (N=91)	50.5% (N=251)	8.9

Competency (N=497)	1	2	3	4	5	6	7	8	9	10	Average Rating
An understanding of the different interpreting demands between visual ASL and tactile ASL (e.g., adding visual or audio description of the visual environment)	0.0% (N=0)	0.0% (N=0)	0.0% (N=0)	0.0% (N=0)	0.8% (N=4)	0.8% (N=4)	1.6% (N=8)	4.8% (N=24)	18.9% (N=94)	73.0% (N=363)	9.6
Fluency in ASL, TASL, and PTASL	0.0% (N=0)	0.0% (N=0)	0.2% (N=1)	0.0% (N=0)	0.6% (N=3)	1.4% (N=7)	4.6% (N=23)	7.4% (N=37)	18.5% (N=92)	67.2% (N=334)	9.4
Familiarity with vocational rehabilitation and its various settings/community partners (e.g., appointments, job shadowing, job coaching, on the job training, job interviews, career counseling)	0.6% (N=3)	1.0% (N=5)	2.0% (N=10)	2.4% (N=12)	4.8% (N=24)	9.7% (N=48)	12.7% (N=63)	15.5% (N=77)	15.1% (N=75)	36.2% (N=180)	8.1

Frequency of Competency Exhibited by DeafBlind Interpreters

Figure 1 demonstrates that respondents do not believe that DeafBlind interpreters demonstrate the use of these eight competencies on a regular basis. Only two in five (39.8%; N=198) indicated that interpreters almost always/very often show respect for diversity in the DeafBlind community. Likewise, just one-third (34.2%; N=170) felt that interpreters show respect for DeafBlind individuals' autonomy on a regular basis. Very few (15.9%; N=79) felt that interpreters express knowledge and understanding of accessibility and how to use various technologies (e.g., ALDs, visual description, orientation and mobility) as frequently. Table 5 shows the results in detail.

Figure 1. Frequency of Competency Exhibited by DeafBlind Interpreters

Frequency of Competency Exhibited by DeafBlind Interpreters
Summary of Almost Always/Very Often (N=497)

Competency	%
Respect for diversity in the DeafBlind community (N=198)	39.8%
Knowledge and understanding of hearing loss and vision loss (N=175)	35.2%
Respect for DeafBlind individuals' autonomy - making their own decisions (N=170)	34.2%
Knowledge of different types of communication options/ techniques needed for tactile communication/ability to…	23.7%
An understanding of the different interpreting demands between visual ASL and tactile ASL (N=115)	23.1%
Familiarity with Vocational Rehabilitation and its various settings/community partners (N=108)	21.7%
Fluency in ASL, TASL, and PTASL (N=103)	20.7%
Knowledge and understanding of accessibility and how to use various technologies (N=79)	15.9%

Table 5 shows the detailed results on frequency of use of the eight competencies by interpreters.

Table 5. Frequency of Competency Exhibited by Interpreters – Detailed Results

Frequency of Competency Exhibited by Interpreters (N=497)	Summary Almost Always/ Very Often	Almost always	Very often	Often	Not often	Almost Never
Knowledge and understanding of hearing loss and vision loss	35.2% (N=175)	11.3% (N=56)	23.3% (N=116)	38.8% (N=193)	23.9% (N=119)	2.6% (N=13)
Knowledge of different types of communication options and techniques needed for tactile communication, and the ability to match an individual's language preference (signed languages, close vision/tactile, haptics)	23.7% (N=118)	7.2% (N=36)	16.5% (N=82)	36.2% (N=180)	35.6% (N=177)	4.4% (N=22)
Respect for diversity in the DeafBlind community	39.8% (N=198)	18.1% (N=90)	21.7% (N=108)	35.4% (N=176)	21.3% (N=106)	3.4% (N=17)
Respect for DeafBlind individuals' autonomy - making their own decisions	34.2% (N=170)	14.7% (N=73)	19.5% (N=97)	35.4% (N=176)	25.8% (N=128)	4.6% (N=23)
Knowledge and understanding of accessibility and how to use various technologies (e.g., ALDs, visual description, orientation and mobility)	15.9% (N=79)	4.8% (N=24)	11.1% (N=55)	29.2% (N=145)	43.5% (N=216)	11.5% (N=57)

Frequency of Competency Exhibited by Interpreters (N=497)	Summary Almost Always/ Very Often	Almost always	Very often	Often	Not often	Almost Never
An understanding of the different interpreting demands between visual ASL and tactile ASL (e.g., adding visual or audio description of the visual environment)	23.1% (N=115)	9.5% (N=47)	13.7% (N=68)	31.8% (N=158)	35.6% (N=177)	9.5% (N=47)
Fluency in ASL, TASL, and PTASL	20.7% (N=103)	7.6% (N=38)	13.1% (N=65)	25.6% (N=127)	41.4% (N=206)	12.3% (N=61)
Familiarity with vocational rehabilitation and its various settings/community partners (e.g., appointments, job shadowing, job coaching, on the job training, job interviews, career counseling)	21.7% (N=108)	7.4% (N=37)	14.3% (N=71)	35.2% (N=175)	29.8% (N=148)	13.3% (N=66)
Frequency of Competency Exhibited by Interpreters (N=497)	Summary Almost Always/ Very Often	Almost always	Very often	Often	Not often	Almost Never
Knowledge and understanding of hearing loss and vision loss	35.2% (N=175)	11.3% (N=56)	23.3% (N=116)	38.8% (N=193)	23.9% (N=119)	2.6% (N=13)
Knowledge of different types of communication options and techniques needed for tactile communication, and the ability to match an individual's language preference (signed languages, close vision/tactile, haptics)	23.7% (N=118)	7.2% (N=36)	16.5% (N=82)	36.2% (N=180)	35.6% (N=177)	4.4% (N=22)
Respect for diversity in the DeafBlind community	39.8% (N=198)	18.1% (N=90)	21.7% (N=108)	35.4% (N=176)	21.3% (N=106)	3.4% (N=17)
Respect for DeafBlind individuals' autonomy - making their own decisions	34.2% (N=170)	14.7% (N=73)	19.5% (N=97)	35.4% (N=176)	25.8% (N=128)	4.6% (N=23)
Knowledge and understanding of accessibility and how to use various technologies (e.g., ALDs, visual description, orientation and mobility)	15.9% (N=79)	4.8% (N=24)	11.1% (N=55)	29.2% (N=145)	43.5% (N=216)	11.5% (N=57)
An understanding of the different interpreting demands between visual ASL and tactile ASL (e.g., adding visual or audio description of the visual environment)	23.1% (N=115)	9.5% (N=47)	13.7% (N=68)	31.8% (N=158)	35.6% (N=177)	9.5% (N=47)
Fluency in ASL, TASL, and PTASL	20.7% (N=103)	7.6% (N=38)	13.1% (N=65)	25.6% (N=127)	41.4% (N=206)	12.3% (N=61)
Familiarity with vocational rehabilitation and its various settings/community partners (e.g., appointments, job shadowing, job coaching, on the job training, job interviews, career counseling)	21.7% (N=108)	7.4% (N=37)	14.3% (N=71)	35.2% (N=175)	29.8% (N=148)	13.3% (N=66)

Please note that out of the 436 respondents who answered the question on ranking, 83.5% (N=364) are currently working as interpreters, while 77.5% (N=282) are also DeafBlind interpreters.

Figure 2 shows the average rankings for the eight competencies in terms of importance. **A lower average indicates higher importance.** Respect for DeafBlind individuals' autonomy was ranked as most important for a DeafBlind interpreter to have. Familiarity with vocational rehabilitation ranked lowest.

Figure 2. Average Ranking of Competency in Terms of Importance

Rank of Competencies by Importance (Average Ranking Shown) (N=436)

Competency	Average
Familiarity with Vocational Rehabilitations and its various settings/community partners (e.g.…	6.1
Knowledge and understanding of accessibility and how to use various technologies (e.g. ALDs…	5.2
Knowledge and understanding of hearing loss and vision loss	5
An understand of the different interpreting demands between visual ASL and tactile ASL (e.g. adding…	4.4
Fluency in ASL, TASL, and PTASL	4.1
Respect for diversity in the DeafBlind community	4
Knowledge of different types of communication options and techniques needed for tactile…	3.8
Respect for DeafBlind individuals autonomy - making their own decisions	3.4

Figure 3 shows both the high and low ranking for each competency. While three in ten (29.8%l N=130) ranked respect for DeafBlind individuals' autonomy as the most important competency among DeafBlind interpreters, few (9.6%; N=42) ranked it lowest among the eight competencies. In contrast, while 14.7% (N=64) ranked familiarity with vocational rehabilitation as the highest in importance, over half (50.9%; N=222) gave it the lowest ranking. This is by far the highest proportion among all eight competencies. As a score closer to '8' means the lowest importance, its average rating of 6.1 demonstrates this further. (Table 6 shows the rankings in detail).

Figure 3. Rankings of Competency in Terms of Importance

Ranking of Competency by Importance
Summary: Rated 1 (Highest) and Rated 8 (Lowest)
(N=436)
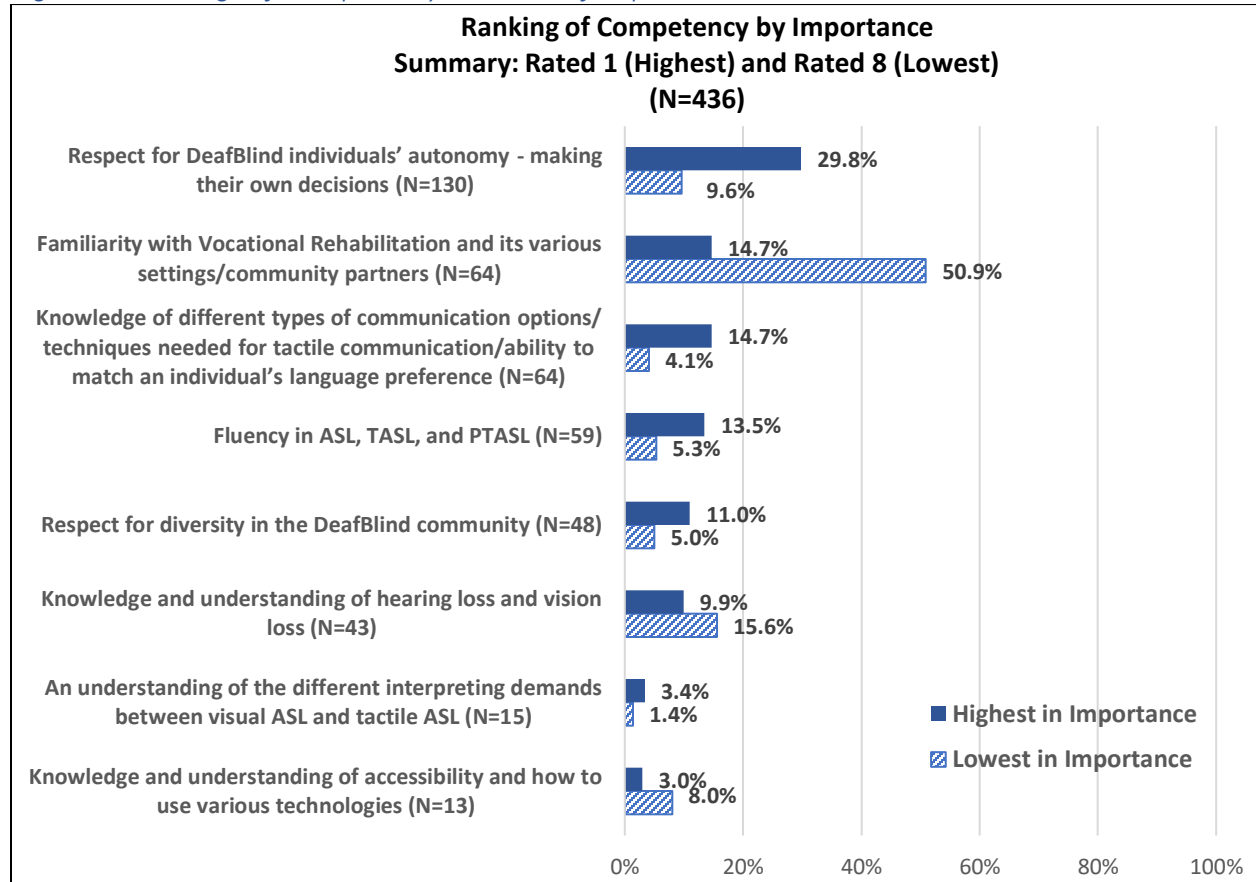
Table 6 shows the rankings for the eight competencies in detail.

Table 6. Rankings of Competencies in Terms of Importance – Detailed Results

Rating of Competency (N=436)	1 (Highest)	2	3	4	5	6	7	8 (Lowest)	Average Rating
Knowledge and understanding of hearing loss and vision loss	9.9% (N=43)	8.0% (N=35)	12.6% (N=55)	7.6% (N=33)	13.5% (N=59)	14.7% (N=64)	18.1% (N=79)	15.6% (N=68)	5.0
Knowledge of different types of communication options and techniques needed for tactile communication, and the ability to match an individual's language preference (signed languages, close vision/tactile, haptics)	14.7% (N=64)	16.7% (N=72)	18.1% (N=79)	16.3% (N=71)	11.5% (N=50)	11.2% (N=49)	7.3% (N=32)	4.1% (N=18)	3.8
Respect for diversity in the DeafBlind community	11.0% (N=48)	20.2% (N=88)	14.0% (N=61)	15.8% (N=69)	13.8% (N=60)	11.0% (N=48)	9.2% (N=40)	5.0% (N=22)	4.0
Respect for DeafBlind individuals' autonomy - making their own decisions	29.8% (N=130)	19.5% (N=85)	8.7% (N=38)	13.1% (N=57)	7.6% (N=33)	4.8% (N=21)	6.9% (N=30)	9.6% (N=42)	3.4

108

Rating of Competency (N=436)	1 (Highest)	2	3	4	5	6	7	8 (Lowest)	Average Rating
Knowledge and understanding of accessibility and how to use various technologies (e.g., ALDs, visual description, orientation and mobility)	3.0% (N=13)	8.5% (N=37)	11.5% (N=50)	9.4% (N=41)	14.7% (N=64)	22.7% (N=99)	22.2% (N=97)	8.0% (N=35)	5.2
An understanding of the different interpreting demands between visual ASL and tactile ASL (e.g., adding visual or audio description of the visual environment)	3.4% (N=15)	10.1% (N=44)	16.7% (N=73)	20.0% (N=87)	22.7% (N=99)	18.6% (N=81)	7.1% (N=31)	1.4% (N=6)	4.4
Fluency in ASL, TASL, and PTASL	13.5% (N=59)	11.9% (N=52)	16.5% (N=72)	16.1% (N=70)	12.6% (N=55)	12.8% (N=56)	11.2% (N=49)	5.3% (N=23)	4.1
Familiarity with vocational rehabilitation and its various settings/community partners (e.g., appointments, job shadowing, job coaching, on the job training, job interviews, career counseling)	14.7% (N=64)	5.0% (N=22)	1.8% (N=8)	1.8% (N=8)	3.7% (N=16)	4.1% (N=18)	17.9% (N=78)	50.9% (N=222)	6.1

Interpreting Services

Use of Interpreting Service

Over half (56.7%; N=345) of respondents have used interpreting services at some time.

Most Important for DeafBlind Interpreter to Possess

Clearly, knowledge of tactile or protactile ASL (42.3%; N=145) is viewed as most important for a DeafBlind interpreter to possess. Also viewed as most important by many (27.7%; N=95) is respect. Voicing skills, on the other hand, are not seen as most important in a DeafBlind interpreter (1.7%; N=6).

Table 7: Most Important for DeafBlind Interpreter to Possess

Base: Have Used Interpreting Services (N=343)	Percent	Count
Knowledge of tactile/protactile ASL	42.3	145
Respect	27.7	95
Description of environmental information and the social mood and attitude in a setting	13.1	45
Signing skills	7.6	26
Positive Attitude	7.6	26
Voicing skills	1.7	6

Vocational Rehabilitation Services

Use of Interpreting Services

Nearly one in four (23.7%; N=144) of all respondents say they have received vocational rehabilitation (VR) services at some point. Among these, 18.3% (N=26) are currently receiving VR services.

Respondents tend to access VR services at a young age, with seven in ten (70.4%; N=100) doing so before age 21. (See Table 8).

Table 8: Age First Accessed Vocational Rehabilitation (VR) Services

Age Range Base: Have Accessed VR Services (N=649)	Percent	Count
Age 15-20	70.4	100
Age 21-30	19.0	27
Age 31-40	6.3	9
Age 41-50	2.8	4
Age 51-60	1.4	2
Age 61-70	0.0	0
Age 71 and above	0.0	0

Among those respondents who are currently receiving VR services, over two in five (42.3%; N=11) have worked with their current counselor for less than one year.

Figure 4: Length of Time Working with Current VR Counselor

Length of Time Working with Current VR Counselor (Base: Currently Receive VR Services) (N=26)

- 5 or more years (N=3) 11.5%
- 3 - 4 years (N=5) 19.2%
- 1 - 2 years (N=7) 26.9%
- Less than 1 year (N=11) 42.3%
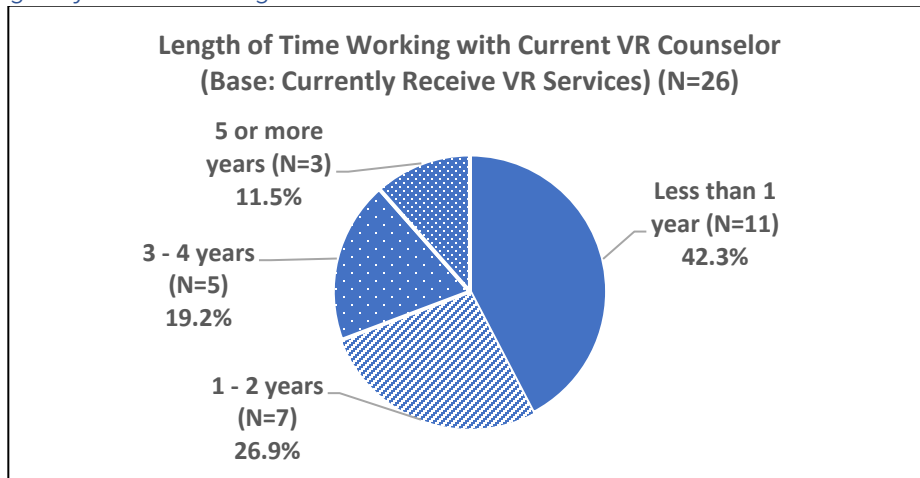
Interpreting Services through Vocational Rehabilitation

Among respondents who indicated they had received VR services, more than two in five (44.4%; N=63) have used interpreters provided by a vocational rehabilitation agency at some time (for appointments, job shadowing, job interviews, etc.).

Among these, over two in three (68.3%; N=43) indicated they were satisfied with the interpreting services. Another one in five (22.2%; N=14) were not sure about their satisfaction with these interpreting services. The main reason cited for dissatisfaction was the belief that these interpreters were not highly skilled (83.3%; N=5).

Table 9. Reasons for Dissatisfaction with Interpreting Services When Working with Vocational Rehabilitation

Reason Base: Dissatisfied with Interpreting Services Provided by VR (N=6) (Multiple Responses Allowed)	Percent	Count
They were not highly skilled	83.3	5
I did not get to choose my interpreter	16.7	1
They were not available when I needed them	0.0	0
They didn't have knowledge about the VR system	0.0	0
I'm not sure	0.0	0

Among respondents who have not used interpreters provided by a VR agency, three in five (60.1%; N=47) stated that their counselor was able to communicate with them fluently. However, one in five (19.0%; N=14) also said the interpreters were not available when needed.

Table 10. Reasons for Not Using Interpreter Provided by Vocational Rehabilitation

Reason Base: Have Not Used Interpreting Services Provided by VR (N=77) (Multiple Responses Allowed)	Percent	Count
My counselor is able to communicate with me fluently	60.1	47
They were not available when I needed them	19.0	14
I was not aware of my communication choices	15.6	12
I do not use interpreters	11.7	9

Interpreters and Educational Background

Working as an Interpreter

Among respondents who are either Hearing/Sighted, Hard of Hearing/Sighted, or Deaf/Sighted, over four in five (84.3%; N=484) are currently working as an interpreter. Three fourths (75.6%; N=366) are certified interpreters, with nearly two in three (62.0%; N=227) having completed an Interpreter Education Program. One in three (33.0%; N=75) earned an Associate's degree, with slightly more (37.4%; N=85) earning a Bachelor's.

Figure 5. Interpreting Degree Earned

Highest Interpreting Degree Earned
(Base: Completed Interpreter Education Program) (N=227)

Degree	Percent
Certificate (N=31)	13.7%
AA (N=75)	33.0%
BA (N=85)	37.4%
MA (N=35)	15.4%
PhD (N=1)	0.4%
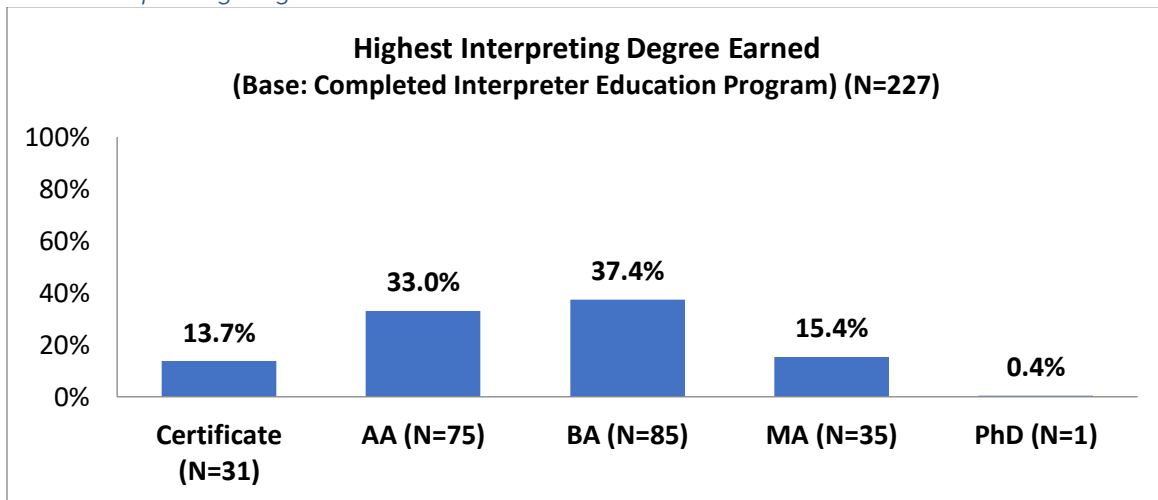
Over half (52.9%; N=120) of those who graduated from an Interpreter Training Program did so since 2001.

Table 11. Time of Graduation from Interpreter Education Program

Years Base: Graduated from Interpreter Education Program (N=227)	Percent	Count
1970-1980	7.0	16
1981-1990	15.4	35
1991-2000	24.7	56
2001-2010	31.3	71
2011-2017	21.6	49

Working as DeafBlind Interpreters

Among the respondents indicating that they are currently working as an interpreter, seven in ten provide interpreting services for the DeafBlind community (72.6%; N=350). Among these DeafBlind interpreters, three in four (75.7%; N=265) stated they are certified interpreters. While the majority of DeafBlind interpreters identified as Hearing/Sighted (79.7%; N=279), another 17.1% (N=61) identified as Deaf/Sighted, and 2.9% (N=10) identified as Hard of Hearing/Sighted.

American Sign Language (88.5%; N=309) is the most widely used form of communication when interpreting for the DeafBlind community, closely followed by close vision interpreting (84.5%; N=295) and Tactile Sign Language (83.4%; N=291). Protactile American Sign Language (PTASL) is used by nearly half (48.4%; N=169) of DeafBlind interpreters.

Table 12. Method of Communication/Language When Interpreting for DeafBlind Individuals

Method/Language Base: Currently Provide DeafBlind Interpreting Services (N=349) (Multiple Responses Allowed)	Percent	Count
American Sign Language (ASL)	88.5	309
Close vision interpreting	84.5	295
Tactile Sign Language (TASL)	83.4	291
Protactile American Sign Language (PTASL)	48.4	169
Other (e.g., draw pictures, gestures, use props)	26.4	92
Haptics/Touch Signals	23.8	83
Oral interpreting	13.8	48
Cued Speech	0.6	2

Nearly half of DeafBlind interpreters (47.3%; N=165) have spent less than 21 hours interpreting for this community in the past year. However, there is a wide range of interpreting hours, with some respondents (14.9%; N=52) only interpreting for just up to five hours, while 14 (4.0%) respondents indicated they interpreted for over 400 hours in the past year.

Table 13. Hours in Past Year Providing Interpreting for DeafBlind Individuals

Hours Base: Currently Provide DeafBlind Interpreting Services (N=349)	Percent	Count
0-5 hours	14.9	52
6-10 hours	20.1	70
11-20 hours	12.3	43
21-30 hours	9.2	32
31-40 hours	7.7	27
41-50 hours	6.9	24
51-100 hours	11.5	40
101-200 hours	4.9	17
201-300 hours	5.4	19

Hours Base: Currently Provide DeafBlind Interpreting Services (N=349)	Percent	Count
301-400 hours	3.2	11
401 hours and above	4.0	14

Training to Interpret for DeafBlind Individuals

While workshops, trainings, and conferences are the most widely used forms of training for DeafBlind interpreters (79.4%; N=277), more informal training via DeafBlind community members or social activities (72.8%; N=254) is also mentioned. Three in five received training through other experienced DeafBlind interpreters (59.6%; N=208). Over two in five (44.1%; N=154) indicated that their training for DeafBlind interpreting was received through an Interpreter Training Program.

Figure 6. Training to Interpret for DeafBlind People

Training Received Through...
(Base: Work as DeafBlind Interpreter) (N=349)
(Multiple Responses Allowed)

- Workshops/Trainings/Conferences (N=277): **79.4%**
- DeafBlind community members/Social activities (N=254): **72.8%**
- Other experienced DeafBlind interpreters (N=208): **59.6%**
- Interpreter Education Program/Interpreter Training Program (N=154): **44.1%**
- Received no training (N=21): **6.0%**
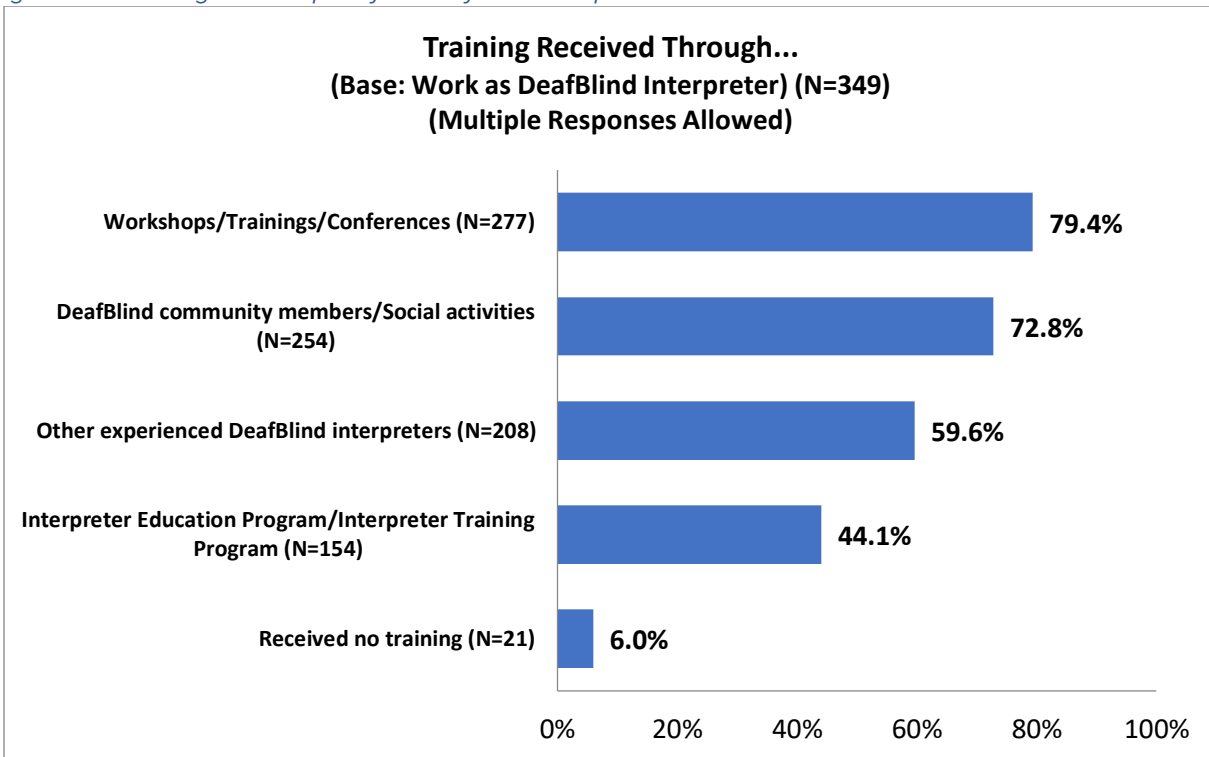
Just over one in three respondents (36.6%; N=123) who received training for DeafBlind interpreting expressed high satisfaction with their training. Over one in five (22.6%; N=76) were definitely not satisfied. Among those who are not satisfied or only somewhat satisfied with the training they received for DeafBlind interpreting, nearly all (92.0%; N=213) are interested in additional training.

Table 14. Satisfaction with Training to Work with DeafBlind Individuals

Satisfaction Base: Received Training to Interpret for DeafBlind (N=336)	Percent	Count
Net: Extremely/Very Satisfied	36.6	123
Extremely satisfied	10.1	34
Very satisfied	26.5	89
Somewhat satisfied	40.8	137
Somewhat dissatisfied	13.7	46
Very dissatisfied	5.4	18
Extremely dissatisfied	3.6	12

Demographic Information Survey Respondents

Geographic Distribution

Respondents are widely distributed across the United States, with California providing one in ten (11.4%: N=70) of the respondents. Minnesota (6.9%; N=42) and Washington (7.4%; N=45) provided the next highest number of respondents. No respondents resided in Delaware, Montana, Puerto Rico, or Rhode Island.

Table 15. Geographic Distribution of Respondents

State (N=612)	Percent	Count	State (N=612)	Percent	Count
Alabama	0.7	4	Montana	0.0	0
Alaska	0.2	1	Nebraska	0.7	4
Arizona	2.0	12	Nevada	0.7	4
Arkansas	0.5	3	New Hampshire	0.8	5
California	11.4	70	New Jersey	1.3%	8
Colorado	1.8	11	New Mexico	0.8	5
Connecticut	0.5	3	New York	5.1	31
Delaware	0.0	0	North Carolina	4.7	29
District of Columbia	1.5	9	North Dakota	0.3	2
Florida	3.4	21	Ohio	5.1	31
Georgia	1.3	8	Oklahoma	1.0	6
Hawaii	0.2	1	Oregon	6.0	37
Idaho	1.0	6	Pennsylvania	2.1	13
Illinois	2.6	16	Puerto Rico	0.0	0
Indiana	1.3	8	Rhode Island	0.0	0
Iowa	1.1	7	South Carolina	0.7	4
Kansas	1.0	6	South Dakota	0.5	3
Kentucky	0.7	4	Tennessee	0.5	3
Louisiana	0.7	4	Texas	5.1	31
Maine	0.8	5	Utah	2.0	12
Maryland	4.9	30	Vermont	0.3	2
Massachusetts	2.8	17	Virginia	1.8	11
Michigan	2.1	13	Washington	7.4	45
Minnesota	6.9	42	Wisconsin	0.5	3
Mississippi	0.5	3	Wyoming	1.5	9
Missouri	1.6	10			

Table 16 shows the state of residence for 29 respondents that identified as DeafBlind, Deaf/Low Vision, Hard of Hearing/Low Vision, or Hard of Hearing/Blind.

Table 16. Geographic Distribution of Deaf and Low/No Vision Respondents

State (N=29)	Deaf/Low Vision	DeafBlind	Hard of Hearing/ Blind	Hard of Hearing/ Low Vision	Total
Alabama		1			1

State (N=29)	Deaf/Low Vision	DeafBlind	Hard of Hearing/ Blind	Hard of Hearing/ Low Vision	Total
Arizona	1				1
California	1	1		2	4
District of Columbia		1			1
Maryland		3			3
Minnesota		2			2
New York		1			1
North Carolina		1			1
Ohio		2		1	3
Oregon	1	1			2
Pennsylvania			1		1
Texas		3			3
Virginia		1			1
Washington	1	3			4
West Virginia				1	1
Total	4	20	1	4	29

Demographics

Over four in five respondents (82.0%; N=364) indicated they are White/Caucasian, with few (4.4%; N=19) subsequently indicating they are Hispanic. Nearly four in five (77.0%; N=332) are women. Nearly half (48.7%; N=210) are between the ages of 41 to 60.

Table 17. Demographic Information

Demographic Criterion (Total N=444, Hispanic N=430, Gender N=431, Age N=431) (Multiple Responses Allowed)	Percent	Count
Race/Ethnicity: White/Caucasian	82.0	364
Race/Ethnicity: Black/African American	4.1	18
Race/Ethnicity: American Indian/Alaska Native	3.2	14
Race/Ethnicity: Asian	1.1	5
Race/Ethnicity: Native Hawaiian/Pacific Islander	0.7	3
Race/Ethnicity: Prefer not to provide	9.0	40
Hispanic: Yes	4.4	19
Hispanic: No	88.1	379
Hispanic: Prefer not to provide	7.4	32
Gender: Male	17.6	76
Gender: Female	77.0	332
Gender: Trans/Non-binary	0.0	0
Gender: Prefer not to provide	5.3	23

Demographic Criterion (Total N=444, Hispanic N=430, Gender N=431, Age N=431) (Multiple Responses Allowed)	Percent	Count
Age: 18-21	0.2	1
Age: 22-30	15.1	65
Age: 31-40	22.3	96
Age: 41-50	23.7	102
Age: 51-60	25.1	108
Age: 61-70	8.1	35
Age: 70 and above	1.4	6
Age: Prefer not to provide	4.2	18

K-12 School Setting Attended

Among those respondents who did not identify as Hearing/Sighted, the majority attended a residential school for the Deaf (42.0%; N=66) or a mainstream school with a small group of other Deaf/DeafBlind or Hard of Hearing students (34.4%; N=54).

Table 18. K-12 School Settings Attended

School Settings Attended (Multiple Responses Allowed) Base: DeafBlind, Hearing/Low Vision, Hard of Hearing/Low Vision, Hard of Hearing/Blind, Hearing/Blind, or Deaf/Low Vision Deaf/Sighted, Hard Of Hearing/Sighted (N=157)	Percent	Count
Mainstream school with no other Deaf or DeafBlind/Hard of Hearing* students	17.8	28
Mainstream school with a small group of other Deaf or DeafBlind/Hard of Hearing* students	34.4	54
Residential School for the Deaf	42.0	66
Residential School for the Blind	1.3	2
Oral Program	8.9	14
Homeschool	0.6	1
Other	7.0	11

Note: Question text adjusted based on identity

Method of Communication Used in School

Among those respondents who did not identify as hearing/sighted, American Sign language (ASL) (56.1%; N=88) and spoken English/Oral (41.4%; N=65) were the main communication methods in school. About one in four used either Pidgin Signed English or Total Communication/SimCom. Tactile Sign Language or Protactile Sign Language were not widely used; however, there were few respondents that are DeafBlind.

Table 19: Method of Communication in School

Methods of Communication in School (Multiple Responses Allowed) Base: DeafBlind, Deaf/Sighted, Hard of Hearing/Sighted, Hearing/Low Vision, Deaf/Low Vision, Hard of Hearing/Low Vision, Hard of Hearing/Blind, or Hearing/Blind (N=157)	Percent	Count
American Sign Language (ASL)	56.1	88
Spoken English/Oral	41.4	65
Pidgin Signed English (PSE)	26.8	42
Total Communication/SimCom	26.1	41
Tactile Sign Language (TSL)	1.9	3
Cued Speech	1.9	3
Protactile American Sign Language (PTASL)	1.3	2

Primary Method of Communication

Over seven in ten (73.5%; N=447) respondents reported that their primary communication method is spoken English (over 70% identify as hearing/sighted). Another two in ten (22.5%; N=137) use American Sign Language as their primary language.

Table 20: Primary Method of Communication

Method (N=608)	Percent	Count
Spoken English/Oral	73.5	447
American Sign Language (ASL)	22.5	137
Protactile American Sign Language (PTASL)	1.5	9
Pidgin Signed English (PSE)	1.2	7
Tactile Sign Language (TSL)	0.8	5
Total Communication/SimCom	0.5	3
Cued Speech	0.0	0

Primary Method of Communication by Relationship to DeafBlind Interpreting

Table 21 presents the primary method of communication broken out by respondents' relationship to DeafBlind interpreting.

Table 21: Primary Method of Communication by Relationship to DeafBlind Interpreting

Relationship to DeafBlind Interpreting	American Sign Language (ASL)	Tactile Sign Language (TSL)	Protactile American Sign Language (PTASL)	Pidgin Signed English (PSE)	Spoken English/ Oral	Total Communication / SimCom	Total
Interpreter (Deaf or Hearing)	16.0%	0.2%	0.0%	0.9%	82.9%	0.0%	438
Support Service Provider (SSP)	40.9%	2.3%	0.0%	2.3%	54.6%	0.0%	44
DeafBlind Individual	28.0%	8.0%	36.0%	0.0%	24.0%	4.0%	25
DeafBlind Advocacy Agency Personnel or Service Provider	36.4%	0.0%	0.0%	4.6%	54.6%	4.6%	22
Family member	38.1%	4.8%	0.0%	0.0%	57.1%	0.0%	21
Interpreter Educator	35.3%	0.0%	0.0%	0.0%	58.8%	5.9%	17
VR Counselor	60.0%	0.0%	0.0%	6.7%	33.3%	0.0%	15
Interpreter Referral Agency Personnel	40.0%	0.0%	0.0%	0.0%	60.0%	0.0%	5
Teacher of the Deaf/DeafBlind	40.0%	0.0%	0.0%	0.0%	60.0%	0.0%	5

Primary Method of Communication by Identity

Table 22 presents the primary method of communication by respondents' identity with regard to hearing/vision.

Table 22: Primary Method of Communication by Identity

Identity	American Sign Language (ASL)	Tactile Sign Language (TSL)	Protactile American Sign Language (PTASL)	Pidgin Signed English (PSE)	Spoken English/ Oral	Total Communication / SimCom	Total
DeafBlind	31.6%	15.8%	42.1%	0.0%	5.3%	5.3%	19
Deaf/Sighted	94.6%	0.0%	0.0%	2.7%	0.9%	1.8%	111
Deaf/Low Vision	50.0%	25.0%	0.0%	0.0%	25.0%	0.0%	4
Hard of Hearing/Sighted	35.0%	0.0%	0.0%	5.0%	60.0%	0.0%	20
Hard of Hearing/Low Vision	25.0%	0.0%	0.0%	0.0%	75.0%	0.0%	4
Hard of Hearing/Blind	0.0%	0.0%	0.0%	0.0%	100%	0.0%	1
Hearing/Sighted	3.6%	0.2%	0.2%	0.7%	95.3%	0.0%	448

Identity	American Sign Language (ASL)	Tactile Sign Language (TSL)	Protactile American Sign Language (PTASL)	Pidgin Signed English (PSE)	Spoken English/ Oral	Total Communication / SimCom	Total
Hearing/Low Vision	0.0%	0.0%	0.0%	0.0%	100%	0.0%	1
Hearing/Blind	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0

Years in Career Role

About one in three (34.7%; N=17) respondents who identified their primary relationship to DeafBlind interpreting as a VR counselor, interpreter educator, interpreter referral agency personnel, or DeafBlind advocacy personnel or service provider have been in this role for 21 years or longer. Likewise, over one in four (28.6%; N=14) have been in this career role for less than 6 years.

Figure 7: Years in Career Role

Years in Career Role
(Base: Identified as VR Counselor, Interpreter Educator, Interpreter Referral Agency Personnel, DeafBlind Advocacy Agency Personnel or Service Provider) (N=49)
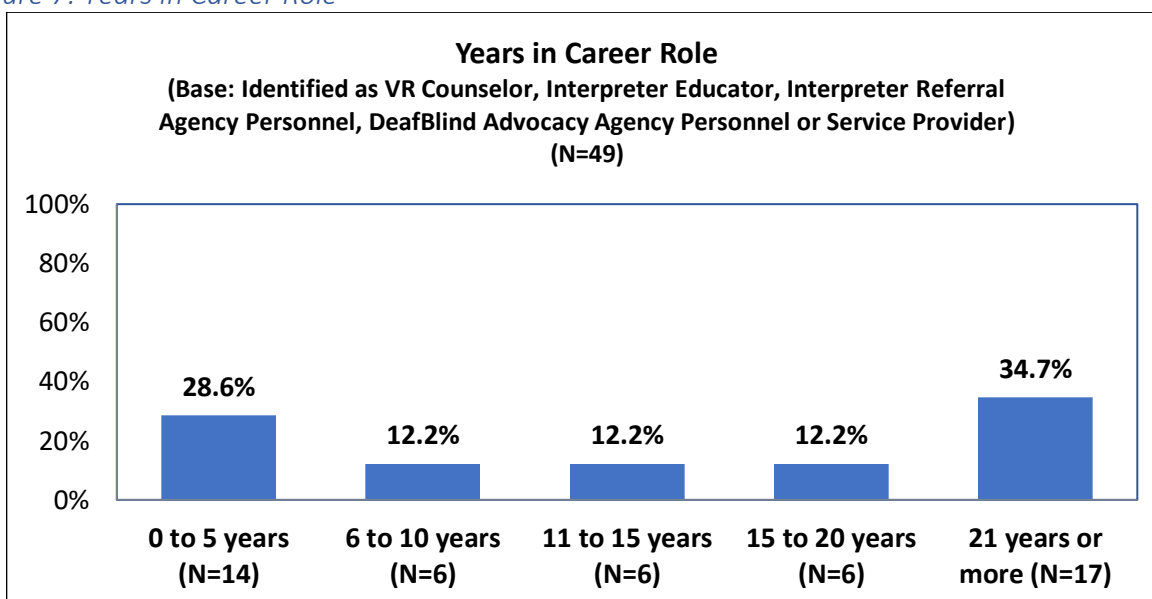
Conclusion

This needs assessment survey demonstrates that members of the DeafBlind community surveyed – the majority of which are current interpreters or DeafBlind interpreters – feel that all eight competencies as presented are important skills that DeafBlind interpreters should possess. Clearly, they also believe that DeafBlind interpreters do not exhibit these skills on a regular basis. In addition, nearly two in three DeafBlind interpreters who indicated they received training for their interpreting skills were not satisfied with their training and expressed a willingness to receive additional training. This demonstrates the need for improved training and education so that interpreters can better address the needs of the DeafBlind community. With the exception of a single sighted/hearing individual, only DeafBlind individuals indicated the use of protactile ASL as their primary method of communication, demonstrating a need for other individuals to become educated and familiar with this language.

Section 5: Needs Assessment Key Findings

2018
Prepared by:
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Heather Holmes

Overview

The materials presented here on interpreting with DeafBlind people are intended for interpreters and interpreter educators, as well as for DeafBlind people seeking resources on advocacy and working with interpreters. There is also information useful to researchers, interpreter coordinators, vocational rehabilitation specialists, and others seeking to increase their knowledge in this area.

This document is available in electronic format on the DBI website at www.dbinterpreting.org. It can also be found in the DBI digital repository online at http://digitalcommons.wou.edu/dbi, and in the NCDB Library.

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Key Findings of the DBI Needs Assessment

The comprehensive *Needs Assessment*, conducted by DBI staff in 2017, revealed both standard and promising practices and identified a number of key competencies considered foundational to effective interpreting in this specialization. These competencies spanned the domains of language, culture, interpreting skill, and professionalism. Regardless of their place in the list below, all findings should be considered important when designing curricula.

Four major *Needs Assessment* activities and tools informed the key findings. They were:
1. An Annotated Bibliography
2. Focus Groups representing DeafBlind, interpreting and VR stakeholders
3. Survey data from 1,364 stakeholders
4. Interviews of 41 experts

The information gleaned from the data was rich in content and consistent in outcomes. Please refer to these supporting data documents as you peruse the following Key Findings.

Key Findings
- By far, the most important competency a DeafBlind interpreter can possess is respect for and ability to promote a DeafBlind person's autonomy and self-determination.
- A DeafBlind interpreter must be comfortable with touch. This has become the cultural precept and standard for working with this community.
- An appreciation for the diversity within the DeafBlind community and its culture, as well as how touch is viewed in various cultures is essential. This appreciation is most often acquired when the interpreter is involved in the DeafBlind community.
- As this setting, with its many moving parts, is most always fluid, interpreters must have strong interpersonal intelligence and possess the soft skills of flexibility, adaptability, and ease in adjustment.
- Honoring the communication methodology preferences of the DeafBlind consumer is mandatory. Not everyone uses TASL or PTASL. As such, a competent DeafBlind interpreter allows people to communicate in the way that is most comfortable for them.
- A successful DeafBlind interpreter will have a working knowledge of the wide range of communication modalities used by individuals who are DeafBlind.
- ASL and Tactile ASL (TASL) are the most commonly used communication modalities employed by approximately four of five DeafBlind interpreters. In contrast, while protactile ASL (PTASL) is on the rise as the preferred interpreting strategy by DeafBlind individuals, only three in ten interpreters responding currently use it. However, nine in ten respondents showed an interest in receiving PTASL training. There is a movement toward PTASL in both the DeafBlind and interpreting communities.
- It is important for a DeafBlind interpreter to be able to scan an environment and relay related information in a manner that is impartial and void of personal opinion or conjecture.

- One cannot overstate the importance of physical and mental stamina in this genre of interpreting.
- Competent DeafBlind interpreters are also experienced ASL interpreters. New/novice interpreters should not make DeafBlind interpreting their entrance to the interpreting field.
- Interpreter referral agencies are often challenged to elicit adequate information regarding DeafBlind interpreting assignments. DeafBlind interpreters should have the ability to assess all aspects of an assignment and be able to successfully mitigate any factors that will impede a successful communication experience, including excusing oneself from the assignment.
- Most DeafBlind interpreters work in community-based settings. Accordingly, education/training should focus on this setting.
- Teamwork is vital to successfully interpreting for DeafBlind people. Knowledge of teaming strategies, and respect for the interpreter/consumer team and the interpreter/interpreter team is fundamental.
- Understanding assistive technology is important because it supports communication facilitation.
- Many of the settings in which DeafBlind interpreters work originate in vocational rehabilitation. A competent interpreter will have a working knowledge of these settings and related terminology.

In addition:
- Interpreters who do not work as DeafBlind interpreters cite lack of opportunity and lack of requisite training as impediments.
- The most natural way to facilitate language development is through hands-on, experiential and applied learning with qualified DeafBlind instructors.
- There are few instructors nationwide providing DeafBlind-related trainings. More instructors, particularly those who are themselves DeafBlind, are needed at both the preservice and post-service level. In tandem, there is a need to prepare trainers/educators to provide effective DeafBlind interpreting instruction at both the pre- and post-service level.

Summary

The findings of the multi-pronged *Needs Assessment* reinforce many of the current competencies noted in the literature. There were, though, overriding themes that clustered above the others. One was the disparity between what were deemed essential competencies and the application of them in actual interpreting settings. Another was the strong need for interpreters to recognize the importance of autonomy and self-determination and to know how to manage the various interpreting strategies that promote these values. Lastly was the need to be touch-centric and adaptable.

While the findings reflect both standard and promising practice, and have merit for any DeafBlind interpreting curriculum, one promising practice that encapsulates all of the key findings into its approach is protactile (PTASL). As a philosophy, the protactile movement promulgates the "DeafBlind Way," a tenet rooted in the principle "...of, by, for, and with Deaf people," or in this case, DeafBlind people. It values touch in the same way Deaf people value vision, ASL and the Deaf Community. It recognizes that today's long-standing, visually-designed communication systems limit access and generate greater passivity on the part of the DeafBlind communication receiver. Simply stated, it charges that: 1) touch is central to a DeafBlind person's way of life and should take a pivotal role in communication; 2) a great more information can and should be transmitted than is currently occurring; and that 3) those who best know how to do this are DeafBlind people.

As an attitude, it challenges DeafBlind individuals to actively own their communication access and the environment around it, rather than waiting for it to come to them, and charges the interpreter to allow this to happen. One DeafBlind woman shared her feelings about protactile: "When I use PTASL, I feel more aware of my environment, of my communicating partner, of myself as a Deafblind person and feel my Deafblind community is more in sync."

As a method, PTASL streams a full range of communication and environmental information in real time, minimizing awkward lag times and turn-taking constraints. Information is relayed through tactile-generated language that is augmented by touch cues that describe the nonverbal/visual messages being conveyed by all persons in and around the communication event, as well as the status of the environment. Lastly, it incorporates a mantra of "ABC - Always Be in Contact." PTASL is best summed up by this DeafBlind participant:

> Protactile communication is immediate. Turn-taking is seamless. There are no awkward time lags or frustrating constraints. Information is received when it is produced, and there is a constant stream of information coming from the person you are talking to—like now, how Jelica is touching my knee and giving me constant feedback. It's fantastic!

Given the movement toward PTASL, and its recognition as an emerging language, the PTASL philosophy and structure will underpin the curriculum guide created by the DBI project.

Section 6: Domains and Competencies

2018
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Heather Holmes

Overview

The materials presented here on interpreting with DeafBlind people are intended for interpreters and interpreter educators, as well as for DeafBlind people seeking resources on advocacy and working with interpreters. There is also information useful to researchers, interpreter coordinators, vocational rehabilitation specialists, and others seeking to increase their knowledge in this area.

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Domains and Competencies

Educators appreciate the importance of accurately understanding the competencies needed to carry out a professional task before they start the process of curriculum design. Accurate competencies are derived when evidence-based inquiry is applied to their development, and stakeholders and experts participate in all aspects of their establishment.

The overarching goal of the *DBI Needs Assessment* is to, through the use of evidence-based inquiry protocols, establish industry-recognized standards of competence for practitioners who interpret for DeafBlind individuals. The information gleaned from the four *Needs Assessment* tools suggests that the following slate of domains and competencies be used when creating curriculum in this specialization. They have been vetted by a panel of experts in the field, which is described more fully at the close of this section.

Generalist Competencies

Today's working interpreters comprise a mosaic of Deaf and hearing interpreters situated on a continuum of competency ranging from novice to master. While evidence-based domains and competencies have not been established for this specialization, they have been generated for the generalist interpreter. A *generalist interpreter* is defined as a "practitioner who has more than superficial knowledge and competence to accurately and reliably interpret a wide range of low-risk communication interactions" (Witter-Merithew, Johnson, & Taylor, 2004, p. 10). Generalist domains and competencies were established in 2005, and published in *Entry-to-Practice Competencies for ASL-English Interpreters* (Wittier-Merithew & Johnson, 2005).

A key finding of the *Needs Assessment* was the need for any interpreter working in DeafBlind settings to possess a strong foundation of the following generalist competencies defined in *Entry-to-Practice Competencies for ASL-English Interpreters:*

Domain	Description
Theory and Knowledge:	Academic foundation and world knowledge essential to effective interpretation
Human Relations:	Interpersonal competencies fostering effective communication and productive collaboration with colleagues, consumers, and employers
Language Skills:	Required levels of fluency in languages in which the interpreter works
Interpreting Skills:	Effective interpretation of a range of subject matter in a variety of settings
Professionalism:	Professional standards and practices

DeafBlind Specialist Domains and Competencies

The *Needs Assessment* further revealed that tactile interpreting demands a complex set of skills that go beyond language transmission. In addition to possessing a new vernacular, and the skills to interpret in multiple modalities, tactile interpreters engage in tasks that are co-occurring. An effective interpreter looks beyond the communicator to the social and physical environment and imparts the external dynamic while simultaneously conveying the overt language message. They must know how to guide a DeafBlind person and incorporate ergonomic strategies to alleviate the physical demands placed on the interpreter. They must understand and know how to maximize the power of touch.

The following domains and competencies extend beyond those of the generalist interpreter. The domains recognized as most important for practitioners to possess when interpreting for DeafBlind individuals include the following:

Domain	Description
Culture and Community	The beliefs and norms of the DeafBlind community and its regional and modality-specific nuances, including the values of respect, autonomy and self-determination
Theory and Knowledge	Academic and world views on the myriad elements that affect the life experiences of DeafBlind individuals
Linguistic Parameters and Tactile Communication Modalities	Working knowledge of PTASL and recognition of its differentiation from visual ASL, awareness of other communication modalities such as haptics and Print-on-Palm
Consumer Assessment	Critical assessment skills that allow for the successful determination of the communication and environmental preferences of the consumer
Interpreting Practice	The act of interpreting communication exchanges between all parties engaged in the communication, including the external environmental dynamic
Professionalism	Possession of the professional ethics, respect for professional development, and knowledge of business acumen

Within each domain is a slate of competencies deemed essential to effective communication. Drawn from the *Needs Assessment* findings, the competencies encompass the knowledge, attitudes, behaviors, and skills (KABS) recognized as most important by stakeholders. DBI does not presuppose that the slate is comprehensive or final. As in every field, as the needs of a target population evolve and change, so do the knowledge and skills needed to effectively respond to the change.

Competencies by Domains
Interpreters working with DeafBlind persons demonstrate the following professional competencies:

DOMAIN 1: CULTURE AND COMMUNITY

Competency: *Engaging in a reflective process to ensure practices promote the existence of a multi-faceted, autonomous, rich DeafBlind community, complete with a unique culture and community norms, and demonstrate respect for diversity*

Primary KABS Addressed: Development of *Attitudes* and *Behaviors*

A qualified interpreter demonstrates, among others:
1. Belief in an "…of, by, for, and with the DeafBlind" PTASL philosophy that allows DeafBlind people to define their communication and their culture
2. Understanding of the history and significance of oppression experienced by the DeafBlind community, and how power dynamics influence all aspects of a communication exchange
3. Recognition of the importance of touch-centric, as opposed to visually-centric, interpreting
4. Understanding of how relaying the physical and visual environment allows the DeafBlind individual to maintain autonomy, make decisions and control current and future environments
5. Recognition of the relationship between the "touch" norms of various cultures and the DeafBlind individual's communication preferences
6. Appreciation of the diversity in the DeafBlind community and promotion of their capabilities
7. Understanding the interpreter role and historical models and evolution in interpreting practice, from helper >> conduit >> communication facilitator >> bilingual/bicultural >> advocate >> ally and >> accomplice. An understanding of boundaries, what it is appropriate and when a behavior oversteps boundaries and overreaches on a DeafBlind person's autonomy.

DOMAIN 2: THEORY AND KNOWLEDGE

Competency: *Understanding of the theory and foundational knowledge that guides/drives decision-making and interpreting choices in interpreting practice*

Primary KABS Acquisition: Acquisition of *Knowledge*

A qualified interpreter demonstrates, among others, knowledge of the:
1. Various communication needs of DeafBlind people who rely on vision to see signs, such as those who use tracking or have close-vision, restricted vision, blurred vision or a combination
2. Various tactile interpreting communication methods utilized by DeafBlind people, including but not limited to protactile ASL or the visual, gestural, tactual, and/or aural/oral mode that matches the DeafBlind individual
3. Physical and mental demands placed on interpreters in this specialization setting and how to minimize them

4. Most prevalent community-based interpreting settings, such as vocational rehabilitation, health care, education and conferences
5. Legal and ethical mandates that govern and guide communication access for Deaf and DeafBlind individuals
6. "Touch" norms of various cultures, as well as gender roles and other culture-specific nuances
7. How different types of vision and hearing loss impact a DeafBlind individual's communication choices

DOMAIN 3: LINGUISTIC PARAMETERS AND TACTILE COMMUNICATION MODALITIES

Competency: *A working knowledge and fluency in the tactual languages and other communication modalities most often used by people who are DeafBlind*

Primary KABS Acquisition: Development of *Behaviors* and *Skills*

A qualified interpreter demonstrates, among others, the ability to:
1. Express native or native-like competency in English, ASL, or other relevant visual or spoken languages
2. Engage in effective communication with a wide variety of DeafBlind people who use a variety of communication methods and modalities, including, but not limited to PTASL.
3. Using the preferred modality of the DeafBlind individual (either tactile, visual or a combination), assess and convey relevant non-linguistic information such as room descriptions, graphics, written texts, participants expressions, actions, etc.
4. Employ other communication touch tools such as haptics or Print-on-Palm
5. Use digital technology-based communication tools as a means of communication

DOMAIN 4: CONSUMER ASSESSMENT

Competency: *The ability to, in concert with the DeafBlind consumer, determine the communication, physical, and environmental tools to be employed for the interpreting service to be provided*

Primary KABS Acquisition: Application of *Skills*

A qualified interpreter demonstrates, among others, the ability to:
1. Ask key questions of referral personnel regarding an assignment and the consumer to determine if the interpreter is best suited for the assignment
2. Identify the DeafBlind individual's communication modality preference
3. Obtain from the DeafBlind individual their physical space and touch preferences
4. Establish feedback strategies to be employed throughout the assignment

5. Exhibit respect and sensitivity toward DeafBlind individuals with additional disabilities or with limited English language when engaging in consumer assessment protocols and procedures
6. Determine if the interpreter possesses the skills to meet the communication and environmental preferences of the DeafBlind individual, and appropriately excuse oneself from the assignment when necessary

DOMAIN 5: INTERPRETING PRACTICE

Competency: *In addition to understanding the basic tenets and possessing the skills that underpin the task of interpreting, the capability to* <u>*apply*</u> *the specialization skills associated with DeafBlind interpreting*

Primary KABS Acquisition: Application of <u>*Skills*</u>

A qualified interpreter demonstrates, among others, the ability to:
1. Prepare for an interpreting assignment
2. Express native or native-like competency in English, ASL, or other relevant language
3. Apply various tactile modalities (e.g., ASL tracking, Print-on-Palm, etc.)
4. Apply effective techniques and strategies when conveying language tactilely (e.g., touch signals, turn-taking, back-channeling, three-way conversations, environmental cues, etc.)
5. Appropriately use expansion techniques
6. Control the communication flow so that effective understanding between parties can occur
7. Apply the most equivalent register to the communication being conveyed
8. Guide in the physical configuration of the interpreting environment to enhance participant understanding, while maximizing the interpreter's ability to take in the non-language messages occurring in the environment
9. Effectively and with respect, foster a collaborative team interpreting environment that includes the DeafBlind person, as well as the Deaf and/or hearing members of the interpreting team, with conscientiousness and recognition of the potential power dynamics within the team (e.g., perceived roles, cultural disparities, discrimination, oppression, audism, vidism, distantism, etc.)

DOMAIN 6: PROFESSIONALISM

Competency: *Internalization of and desire to promote a professional culture that reinforces professional growth and development*

Primary KABS Acquisition: Development of <u>*Attitudes*</u> *and* <u>*Behaviors*</u>

A qualified interpreter demonstrates, among others:
1. Participation in professional organizations that support or advocate for DeafBlind individuals
2. Keeping abreast of current trends in interpretation, linguistics, cultural studies, and research, including professional journals associated with vocational rehabilitation and DeafBlind topics
3. Pursuance of educational and interpreting credentials
4. Application of American cultural values to business norms, such as punctuality and conciseness in communications

Vetting of Domains and Competencies

Domains and Competencies were reviewed in early 2018 by nine experts in the field. The group represented educators, practitioners, and vocational rehabilitation counselors for DeafBlind people. Of this group, three identified as DeafBlind, one as Deaf, and four as hearing.

Experts were asked to respond to the following slate of statements for each Domain/Competency, rating each set on a scale of 1 to 5, with a rating of five indicating "strongly agree" and a rating of 1 indicating "strongly disagree".
1. The broad-based Competency is essential.
2. The primary KABS (knowledge, attitudes, behaviors, and skills) being addressed are correct.
3. The Demonstration of Competency statements are the most important ones an interpreter should possess.
4. The Demonstration of Competency statements are correctly placed in this domain.
5. The competency statements are clearly articulated.
6. Overall, this Domain section reflects a real-world need.

Respondents were also asked to share any change, thoughts, or explanations to their responses. Almost all comments made suggested minor alterations to grammar and word choice.

Based on a combined 324 responses from nine individuals, the overall rating of the relevance of the *Domains and Competencies* was 4.6, reflecting a group consensus of between "agree" and "strongly agree" as relevant to the act of DeafBlind interpreting. Ratings by Domain/Competency were as follows:

Domain	Competency	Average Score
Culture & Community	Engaging in a reflective process to ensure practices promote the existence of a multi-faceted, autonomous, rich DeafBlind community, complete with a unique culture and community norms, and demonstrate respect for diversity	4.7
Theory & Knowledge	Understanding of the theory and foundational knowledge that guides/drives decision-making and interpreting choices in interpreting practice	4.5
Linguistic Parameters & Tactile Communication Modalities	A working knowledge and fluency in the tactual languages and other communication modalities most often used by individuals who are DeafBlind	4.4

Domain	Competency	Average Score
Consumer Assessment	The ability to, in concert with the DeafBlind consumer, determine the communication, physical, and environmental tools to be employed for the interpreting service to be provided	4.5
Interpreting Practice	In addition to understanding the basic tenets and possessing the skills that underpin the task of interpreting, the capability to apply the specialization skills associated with DeafBlind interpreting	4.5
Professionalism	Internalization of and desire to promote a professional culture that reinforces professional growth and development	4.7
All Domains	All Competencies	4.6

The *Domains and Competencies* identified in this *Needs Assessment* were based on the feedback of more than 1,200 stakeholders who have an impact on the lives of DeafBlind people, and were vetted by nine content experts. We hope that educators and trainers assign this slate of *Domains and Competencies* as foundational to their teaching content and practices, and that these *Domains and Competencies* spur dialogue that leads to the expression of philosophical ideas and new and bold approaches to interpreting for DeafBlind people.

References

Witter-Merithew, A., Johnson, L. & Taylor, M. (2005). *Entry-to-practice competencies for ASL/English interpreters*. Greeley, CO: Distance Opportunities for Interpreter Training Centers. Retrieved from: http://www.unco.edu/cebs/asl-interpreting/pdf/asl-english-interpretation/entry-to-practice-competencies.pdf

Appendices

Baseline - Appendix A: List of Trainers/Workshops/Universities

Table 1. Interpreter Education Programs

You mentioned you learned these skills in an Interpreter Education Program. Please provide the name of the program.	Frequency
ASL Classes	1
Cincinnati State	1
Cleveland State ITP	1
Colin County Community College	1
College of Staten Island S.I.P.	1
Community College	1
Community College of Allegheny County	1
Towson University	1
Deaf communications Studies	1
Dekalb College	1
Delgado	1
Dept of Interpretation - Gallaudet University	1
Des Moines Area Community College ASL/English interpretation program	1
Douglas College (Canada ITP)	1
DTCC	1
Florida Gateway College	1
Floyd College	1
Harper College	1
Hinds Community College ITT	1
Deaf	1
ITP Northern Essex Community College	1
JALC	1
John A. Logan College ITP	1
Keystone Interpreting Solutions	1
Kirkwood Community College	1
M.A.R.I.E CENTER	1
Manual Communication	1
Maple woods	1
Miami Dade Community College	1
Moraine Valley Community College	1
NIEC	1
Northcentral Technical College	1
Northern Illinois University	1
Baker College	1
OCE ITP	1
Kapiolani Community College	1
Palomar College ITP	1
PCC	1

You mentioned you learned these skills in an Interpreter Education Program. Please provide the name of the program.	Frequency
Pierce College	1
Pima Community College	1
Professions in Deafness	1
Road to Deaf Interpreter	1
San Antonio College	1
San Diego Mesa College	1
SECC	1
Seymour Joseph	1
Spokane Falls Community College	1
St. Louis Community College, Florrisant Valley	1
Tarrant County College	1
Umpqua Community College	1
University of New Hampshire ITP	1
University of North Colorado	1
University of Wisconsin Milwaukee	1
UVU: Deaf Studies (ACIPP)	1
Valdosta State University	1
Valdosta State University	1
Wilson Community College	1
Wright State University	1
American Sign Language School of Seattle	2
Austin Community College	2
Bethel College	2
Bloomsburg University	2
Catonsville Community College ITP	2
Columbus State Community College	2
Community College of Baltimore County	2
Deaf Interpreting Training	2
El Camino ITP	2
Front Range Community College	2
Goshen College	2
Hillsborough Community College	2
Kent State ITP	2
Lansing Community College ITP	2
Oakland Community College	2
Oklahoma State University OKC	2
Salt Lake Community College	2
Troy University ITP	2
U of So FL	2
University of Arizona	2
University of North Florida	2
University of Southern Maine	2

You mentioned you learned these skills in an Interpreter Education Program. Please provide the name of the program.	Frequency
UNM	2
American River College ITP	3
Columbia College ITP	3
Community College of Philadelphia ITP	3
JCCC ITP	3
Northeastern University	3
Saint Paul College ITP	3
Sinclair Community College	3
St Paul ITP	3
St. Catherine University ITP	3
University of North Carolina at Greensboro	3
Waubonsee Community College	3
CSUN	4
Iowa Western Community College ITP	4
Mott Community College	4
NTID ITP	4
UNF ITP	4
Union County College	4
Eastern Kentucky University ITP	5
Ohlone ITP	5
UALR ITP	5
LaGuardia ITP	6
William Woods ITP	6
Gallaudet University	7
University of Georgia Perimeter College	8
WOU ITP	15
Seattle Central CC ITP	17
ITP (no program specified)	21
Grand Total	*255*

Table 2. DeafBlind Instructors

You mentioned your coursework included DeafBlind instructor(s). What were the names of these instructors?	Frequency
a guy I don't remember	1
Angie Orlando	1
Arizona Welsh	1
Bapin Bhattacharyya	1
Bob Green	1
Catherine DuBois	1
Cheryl Poff	1
Community member Christine "Chris"	1

You mentioned your coursework included DeafBlind instructor(s). What were the names of these instructors?	Frequency
Doris Fedrid	1
Dr. Trisha Wooten	1
Haley Broadway	1
Harry Anderson	1
Janet Marcous	1
Jason Herbers	1
Jeff Bohrman	1
Jill Gaus	1
John Lee Clark	1
Laura Godbold	1
Les Peterson	1
Mike	1
Patty Starr	1
Paul Ducharme	1
Professor Godbold	1
Rhonda Voight	1
Richard McGann	1
Roger Poulin	1
Sarah Morrison	1
Stephen Erlich	1
Steve Collins	1
Art Roehrig	2
Charlotte Whitacre	2
Jamie Pope	2
Lee Clark	2
Mark Landreneau	2
Isabel Florence	3
Jelica Nuccio	5
Patrick Cave	6
aj granda	8
Grand Total	*61*

Table 3. Protactile ASL Training Providers

You mentioned you learned these skills through protactile ASL training. What was the name of training?	Frequency
aj granda	63
Annie Welch	1
Ashley Benton	1
at RID Region 5 conference	1
Bryen Yunashko	11
Cassondra Holly	1
Chad Metcalf	1

Chris Woodfield	1
CM Hall	4
DeafBlind Training and Interpreter and Professional Development	1
Harry-FSDB	1
Hayley Broadway	10
I didn't have one	1
Isabel Florence	4
Jamie Pope	10
Jason Herbers	4
Jasper Norman	2
Jelica Nuccio	61
Jill Gaus	4
John Lee Clark	3
Kevin Richmond	1
Kim Powers	1
Kimberly Williams	5
Lee Clark	2
Maricar Marquez	1
Marilyn Trader	1
Mike Sims	1
NC Div of Services for Deaf and Hard of Hearing	1
Online through DB-TIP	1
Oscaar Chacon	1
Pam Wellumsun	1
Peggy Johnson	1
Randy Pope	2
Rebecca Cowan-Story	1
Rhonda Jacobs	1
Roxanne Homstead	1
Sarah Morrison	7
Seabeck	1
Shannon Simon	1
Steve Oglesbee	1
Steven Collins	8
Vicky Maggliochino	1
Volunteered at Seabeck 2016	1
Yvenne	2
Grand Total	*229*

Table 4. Private Training Providers

What were the name(s) of the instructor(s) at this private training program?	Frequency
aj granda	1
Angela Theriault	3
Arthur Röhrig	1
Ashley Benton	4

What were the name(s) of the instructor(s) at this private training program?	Frequency
Bapin Bhattacharyya	3
Bob Green	1
Bryen Yunashko	1
Cindi Robinson	1
DB participant	1
Deaf blind participant	1
Elaine Ducharme	1
et al...training staff	1
Ira Padhye	1
Jackie Engler-Morris	1
Jamie Pope	1
Jamie Pope & Steve Collins	1
Janice Cagan-Teuber	1
Jason Herbers	1
Jeff Trader	1
Jelica Nuccio	2
Jelica Nuccio & aj granda	2
John Clark	1
John Mascia	1
Julie Durando	1
Katherine Gabry	1
Kathy Zarate	1
Marilyn Trader	3
Marsha Drenth	1
Mericar Marquez	4
Multiple Guest Speakers	1
Rhonda Jacobs	1
Robert Smithdas	1
Rosie Gibson	1
Shannon Wright	1
Sister Bernie	2
Stacey	1
Sue Oulette	1
Susanne Morgan Morrow	5
Grand Total	*57*

Table 5. Workshops and Conferences

Workshops/conferences	Frequency
(NAD) AJ PT Workshop	1
A second DB interpreting workshop with Teresa Smith and others from the Lighthouse in Seattle	1
AADB	24
ABL- SSP workshop	1
Ad hoc Local Workshop	1

Workshops/conferences	Frequency
ADARA	2
Advanced DeafBlind Interpreting	1
aj & Jelica	1
aj granda	1
Annual Deaf Blind Camp De Salles Center MI	1
Another local deaf blind conference	1
ARID Biennial Conference 2011	1
ASLIS Pro-Tactile Workshop	1
Bapin group international deaf blind convention	1
Beyond Arms Reach OM for DB	1
Bryen Yunashko	2
BYU	1
CA Dept. of Rehabilitation SB105 2012	1
camps	1
Cannot remember the names of the other conferences	1
Can't remember the name of the other conference	1
CASA	1
CHARGE Syndrome Conference	1
Chicago Hearing Society	1
Chicago lighthouse for the blind	1
CIT	6
CM Hall (Benicia workshop)	1
CODA conference	1
Colorado RID	1
Columbia Lighthouse for the Blind DeafBlind Workshop	3
Communication Skills Workshop (TX)	1
Community workshops	1
Conference in Bloomsburg, PA, 1990s	1
Conference in Philadelphia, 1990s	1
Copd trainings	1
CSUN Symposium	1
DARS - Deaf Interpreter Training	1
DB 101	1
DBPT Happy Hour (had a very short intro "workshop" at the beginning)	1
DBR in Chicago	1
DB-TIP	6
DBYAA	1
DeafBlind Project of Minnesota	1
DeadBlind Workshop	1
Deaf Action Center (Dallas) I can't remember name of workshop	1
Deaf inc- deaf blind workshop	1
Deaf Interpreter Conference	3
Deaf Interpreter Conference 2	1
Deaf Interpreter Conference 2017	1
Deaf Interpreter Trainings	1

Workshops/conferences	Frequency
Deaf/Blind - WOU in the 1970's	1
Deaf/Blind PA Conference	1
DeafBlind 101	2
DeafBlind Awareness Week	1
DeafBlind camp	1
DeafBlind camp in Minnesota	1
Deafblind Camp of Texas	1
DeafBlind Camp of West River, Maryland	1
DeafBlind Camp SSP	1
DeafBlind Community Class offered to the community where the students from the program partnered with experienced interpreters	1
Deafblind Interpreter Allies	1
DeafBlind Interpreting	3
DeafBlind Interpreting	1
DeafBlind Interpreting Workshop at Ohlone College (1985)	1
DeafBlind Intervener in Minnesota	1
DeafBlind Project for PA	1
DeafBlind Retreat	1
DeafBlind Symposium	1
DeafBlind Symposium (Texas)	1
DeafBlind Transition Institute	1
DeafBlind weekend	1
DeafBlind Workshop	1
DeafBlind Workshop	1
DeafBlind workshop at desales center	1
DeafBlind workshop provided by ASLIS	1
DeafBlind Camps of Maryland	1
DIC	1
DIC2	1
Do not remember names	1
DSDHH Utah Interpreter Program	1
DVR-sponsored SSP/DB training w/Paul Deeming	1
EDbU	1
Educationally Interpreters Project sponsored workshop	1
Falling into DeafBlind World	1
FDBA training	1
First National DeafBlind Online Conference	1
Florida- deaf blind expo	1
Florida Silent Weekend 2017	1
From the Db Perspective	1
GAD SSP Training	1
Gallaudet course	3
Golden Rule	1
Great Lakes Area Regional Resource Center	1
GVRRID	3

Workshops/conferences	Frequency
Haptic Language	1
Haptics and Touch Signals hosted by Florida Educational Interpreter Project	2
Haptics training	1
HKNC	5
IDBE	2
Illinois Deaf and Hard of Hearing Annual Conference	1
Illinois DeafBlind Retreat	1
in San Francisco, CA	1
in Spokane, WA	1
International DeafBlind Conference	2
International DeafBlind Expo	6
Interpreting and SSP workshop	1
Interpreting for DeafBlind Individuals	3
Interpreting for DeafBlind Individuals in Health Care Settings	1
Interpreting for Students Who Have Dual Sensory Loss: Deaf-Blindness with Sue Ann Houser	1
It was at Chicago Lighthouse	1
Johnson County Community College	1
Justice for Deaf Victims National Coalition (JDVNC)	1
KAI	1
Kansas Associate for the Deaf	1
Kentucky Deafblind Retreat	2
Kevin Richmond	1
LA School for the Deaf	1
LA-RID	1
Local MN workshops	1
Local workshop	2
LRID	1
many conferences over 25 years	1
Many over my 38 year career	1
Maple woods workshop for db	1
Minnesota RID	1
Missouri commission for the deaf	1
Missouri Interpreter Conference	3
MRID	1
MWADB	1
MWDB	1
NAD	6
NAD	1
NAD Conference	1
NAD RID Region V conference in Arizona	1
NAD/RID conference w/Deaf Blind Haptics training	1
NAOBI Power Hour Workshop	1
American Association of Deaf-Blind Experience	1
National Association of the Deaf 2016	1

Workshops/conferences	Frequency
National Deaf Blind Association	2
National Deaf Education	1
National Deafblind Conference (presented as an intervenor)	1
NCDBA	3
NCRID	2
New England DeafBlind weekend in 2005	1
New Mexico RID	1
NJAD/NJRID Conference	1
NorCRID	2
North Carolina national conference	1
Northeastern University mini sessions	1
Northeastern University's SNIN Conference 2016	1
not a conference, but a DB Adult Camp in Maine (2004/5?)	1
Now I teach these workshops	1
NTFDBI	1
NTID Access Services Professional Development Program	1
OADB	2
Ohio Center for Deafblind Education	1
One at Purple retreat	1
Online	1
Open Hands Open Access	1
ORID Protactile workshop	1
Others I can't remember before 2014 so not on RID transcript	1
Pass Project	1
Pattan	1
PCRID	2
PEPNET 2 Interpreting for DHH with Additional Disabilities	1
Perspectives of the DeafBlind Community	1
Perspectives on Deaf/Blind Interpreting, Joan Pellerin, RI Region I Conference, Atlantic City, NJ	1
Pittsburgh workshops	1
Private Lessons	1
Protactile	2
Protactile - An Introduction	1
Protactile 1, 2 & 3	1
Protactile 3 days workshop in Arizona	1
Protactile and Haptics	1
Protactile the deafblind way	1
Protactile vs. Haptics: What's the Difference?	1
Protactile workshop	1
Protactile Workshop at Seabeck DeafBlind Retreat	1
Protactile workshop by Steven Collins	1
Protactile workshop through ASLIS	1
Protactile: The DeafBlind Way in the Interpreting World Hosted by WSRID and the Seattle Lighthouse for the Blind, Inc	1

Workshops/conferences	Frequency
Rainbow Alliance of the Deaf conference	1
Really a few hours within larger workshops	1
Rebecca Cowan-Story & Dana Tarter	1
Region 1 Conference	1
regional conference workshops	1
Regional RID conferences	1
Rene Pellerin	2
RID	18
RID Conference	2
RID National & Regional Conferences	1
RID National Conference	1
RID National Conference, DeafBlind Pre-conference, Indianapolis	6
RID National/Regional/State	1
RID or Street Leverage (I forget)	1
RID Region 3	2
RID Region 4 Conference	2
RID Region 5 Conference	4
RID Region V Conference	1
RID Regional Conference 2013	1
RID Regional in SD	1
RID State and National conferences	1
RID workshops	1
RID/NAD National Conference 2016	1
Rochester Deaf Awareness Week '15, '16	1
Sanderson Community Center for the Deaf and Hard of Hearing, Stephen Ehrlich (deaf blind presenter)	1
SDCRID Workshop	1
Seabeck	16
Seabeck	1
Seattle DBS training/ssp	1
Seattle. Atlanta national conferences	1
SERID	6
Several NJ DB League meetings in community	1
Several others during the years that I cannot remember	1
SHIM=DB DBW (DeafBlind Workshop)	1
Silent Weekend	2
Sorenson	1
SSP	2
SSP and Interpreting Training	1
SSP orientation	1
SSP training	2
SSP Training	1
SSP training through Meril	1
Support Service Provider (SSP) Training, NJCB&VI	1
Support Service Provider training in Washington DC	1

Workshops/conferences	Frequency
Tactile Interpreting, Waubonsee Community College, Richard Ahern	1
Texas Baptist Conference for the Deaf	1
Texas DeafBlind symposium	1
Texas Society of Interpreters for the Deaf	1
The Art of Working with INdividuals Who are Deaf Blind	1
The Lighthouse for the Blind, Inc.	1
Theresa B. Smith	1
too long ago to remember - but in FL or through SERID	1
Took workshop at DBSC	1
Total Immersion Workshop, Orlando, FL	1
Touch Signals	3
Touch Signals Awareness	1
training for AIDB young adults transition institute	1
Trends to Working with DeafBlind People	1
TSID	1
TSID, various workshops	1
UCC	1
University sponsored workshop	1
Various community workshops for DB	1
various workshops through IRID	1
Very long ago. Think it was taught by a deaf man named Mark Azzuro (sp?)	1
Visual to tactile	1
VRID	1
VTRID workshops	1
Washington DC Deaf Blind Conferences	1
Webinar DBTIP	1
Western Oregon University	2
With Impaired Sight and Hearing	1
Working Together Conf.	1
Working with Db	1
Workshop	1
Workshop	1
Workshop at WOU	1
Workshop called Deaf/Blind Interpreting	1
Workshop Presented by Joan Blake	1
Workshop with Elaine Ducharme	1
Workshop with Rene and Joan Pellerin	1
Workshops at FSDB	1
Workshops by local CDIs	1
Workshops by local Deaf Blind Individual, Stephen Ehrlich	1
Workshops I have had at my place of employment (higher education)	1
Workshops in the capital	1
Workshops provided thru education facility	1
WSRID	3
FRID conference	2

Workshops/conferences	Frequency
Grand Total	*405*

Table 6. Private Training Programs

What was the name of this private training program?	Frequency
? Person-Centered Planning (one time ago!)	1
Addy McBride Center	1
Arizona Deafblind Project's Intervenor Team Training	1
Cannot recall -	1
cant remember	1
Certificate Program in the Rehabilitation of Persons who are Deaf/Blind	1
DBCAN	1
DBSM	1
DBTIP	1
Deaf blind culture	1
Deaf Blind Living Well Services	1
Deaf Blind Service Center (DBSC)	1
Folks from Norway	1
HKNC	20
i can't remember it was about 10 years ago	1
i couldnt remember the name of the program was in dekalb, IL	1
I don't remember (10 years+ ago)	1
I don't remember.	1
Idk	1
Interpreting Strategies for Individuals Who Are DeafBlind	1
Intervener Certification Utah State University	1
It was a rehab center in Chicago	1
Its was just a volunteer thing	1
led by Susie Morgan Morrow	1
M.A.R.I.E.	1
MDRS Deaf Program	1
NA	1
National Institute on Deaf Blindness Northern Illinois University	1
NCDSDHH	1
NCIEC Training program	1
New Mexico State University	1
Not sure the name	1
Open Hands, Open Access Modules - National Deaf Blind Project, through VA Commonwealth University	1
Orientation	1
part of my job at the Perkins School for the Blind	1
Protactile part 1, 2 & 3; Touch Signals, not remember what it was at IDBE LV	1
PTASL booths, coffee hours and IDBE	1
SSP	2
Tactile Communications	1

What was the name of this private training program?	Frequency
There was no formal name of the training program. I have worked directly with DB individuals that have provided me with training and feedback.	1
Touch Communication	1
Touching Lives: Interpreting Techniques for the DeafBlind Population	1
Grand Total	*62*

Baseline - Appendix B: Online Survey

Online Baseline Survey and Instructions

Thank you for participating in the DeafBlind Interpreting National Training and Resource (DBI) survey to assist us in establishing the number of interpreters who are working with DeafBlind individuals in various capacities. The term DeafBlind will be used throughout the survey. We recognize the combined range of hearing and vision loss and how individuals may identify differently. For our survey purposes, the definition includes individuals who are DeafBlind, deaf-blind, and/or who have dual sensory loss as well as those individuals who are late-deafened with vision loss, are close vision, or are oral DeafBlind. This survey will take about 20 minutes to complete, depending on your answers to some of the questions. You must answer the first question so we can know you have read and agree with the Consent information. You may also save your work and continue at a later time if you wish. In order to save, please finish a page and click "Next." Without this step, your answers to the questions will not be saved. You have one week available to finish this survey. Because this is a research project, we must provide you with information about the project and any risks involved. In order to complete the survey, you must review the brief informed consent information. Next, please click on this link Informed Consent Form.pdf. It will open the informed consent form in another window. Please read it to understand your rights as a survey participant. You can also print the document. Once you have finished, click to close and return to this survey.

Please select your choice below. Clicking on the "Agree" button indicates that: - You have read the Consent information - You voluntarily agree to participate - You are 18 years of age or older
- Agree (1)
- Disagree (2)

Condition: Disagree Is Selected. Skip To: End of Survey.

1. In the past year, how many hours would you estimate you have interpreted for individuals who are DeafBlind?
- Estimate of hours in past year: (write in hours) (1) _____
- I have not interpreted for DeafBlind individuals in the past year (2)
- I have never interpreted for DeafBlind individuals (3)

Display This Question:
If In the past year, how many hours would you estimate you have interpreted for individuals who identify as DeafBlind? I have not interpreted for DeafBlind individuals in the past year Is Selected

2. When was the last time you interpreted for a DeafBlind individual?
- 1-2 years ago (1)
- 3-5 years ago (2)
- 6-10 years ago (3)
- 11 or more years ago (4)

Display This Question:
If In the past year, how many hours would you estimate you have interpreted for individuals who identify as DeafBlind? I have not interpreted for DeafBlind individuals in the past year Is Selected

3. Why haven't you interpreted for DeafBlind individuals in the past year?

Display This Question:
If In the past year, how many hours would you estimate you have interpreted for individuals who identify as DeafBlind? I have never interpreted for DeafBlind individuals Is Selected

4. Why have you never interpreted for a DeafBlind individual? Please check all that apply.
- I have no training in this specialty area (1)
- I am intimidated by what their needs might be (2)
- There are very few DeafBlind individuals in my area (3)
- This is not something that interests me (4)

Condition: I have no training in this ... Is Selected. Skip To: 38. How did you receive the invitatio....Condition: I am intimidated by what th... Is Selected. Skip To: 38. How did you receive the invitatio....Condition: There are very few DeafBlin... Is Selected. Skip To: 38. How did you receive the invitatio....Condition: This is not something that ... Is Selected. Skip To: 38. How did you receive the invitatio....

Display This Question:
If In the past year, how many hours would you estimate you have interpreted for individuals who identify as DeafBlind? Estimate of hours in past year: (write in hours) Is Selected

5. In the past year, what proportion of your time interpreting is spent with DeafBlind individuals?
- Over 75% (1)
- 50-74% (2)
- 25-49% (3)
- 24% or less (4)

Display This Question:
If In the past year, how many hours would you estimate you have interpreted for individuals who identify as DeafBlind? Estimate of hours in past year: (write in hours) Is Selected

6. In the past year, in what settings have you interpreted for DeafBlind Individuals? Please check all that apply.
- Pre K/ early intervention (1)
- K-12 (2)
- Postsecondary educational settings (3)
- Work (5)
- Families of DeafBlind children (6)
- Community (e.g., doctor appointments) (7)

- Religious or spiritual services (8)
- Recreational activities (9)
- Other (please specify) (10) _____

Display This Question:

If In the past year, how many hours would you estimate you have interpreted for individuals who identify as DeafBlind? I have never interpreted for DeafBlind individuals Is Not Selected

7. How would you rate your current skills/knowledge/abilities to work as a DeafBlind interpreter?
- Novice: New or inexperienced in DeafBlind interpreting field (1)
- Intermediate: Transitional; in-between novice and proficient. Emerging. (2)
- Proficient: Comprehensive skills and knowledge in field of DeafBlind interpreting (3)

Display This Question:

If In the past year, how many hours would you estimate you have interpreted for individuals who identify as DeafBlind? I have never interpreted for DeafBlind individuals Is Not Selected

8. How often do you use the following communication modalities when interpreting for DeafBlind individuals?	Always (1)	Often (2)	Seldom (3)	Never (4)
Is Tactile ASL (TASL) (Visual ASL communicated via touch, including environmental information) (1)				
ASL (Visual, gestural language) (2)				

Protactile ASL (PTASL) (Tactile language using receiver's body to convey linguistic information and emotions; sociocultural movement developed in the DeafBlind community) (3)			
Haptics/Touch Signals (Nonverbal communication using touch with a set inventory of symbols) (4)			
Tracking (DeafBlind individual holds the signer's wrists or elbows to better follow ("track") their signing) (5)			
Sim-Com/Sign-supported speech (7)			
Other (6)			

Display This Question:
If How often do you use the following communication modalities when interpreting for DeafBlind in... Other - Always Is Selected
Or How often do you use the following communication modalities when interpreting for DeafBlind in... Other - Often Is Selected
Or How often do you use the following communication modalities when interpreting for DeafBlind in... Other - Seldom Is Selected

9. You mentioned you use "other" communication modalities when interpreting for DeafBlind Individuals. What are you using?

Display This Question:
If How often do you use the following communication modalities when interpreting for DeafBlind in... - Never Is Less Than 7

10. How did you learn these skills? Please check all that apply.
- I am a heritage (native) ASL signer (1)
- Interpreter Education Program (2)
- ASL coursework (3)
- Protactile ASL Training (4)
- Private training program (e.g., HKNC) (5)
- From DeafBlind individuals [e.g., family, friends, mentors, educators] (6)
- With experienced DeafBlind interpreters (7)
- Workshops/conferences specific to working with DeafBlind individuals (8)
- No formal training (9)

Display This Question:
If How did you learn these skills? Please check all that apply. Interpreter Education Program Is Selected

11. You mentioned you learned these skills in an Interpreter Education Program. Please provide the name of the institution, the city and state, and the type of degree or certificate awarded.
Name of program: (1)
City, State: (2)
Degree or certificate awarded: (3)
Display This Question:
If How did you learn these skills? Please check all that apply. Interpreter Education Program Is Selected

12. Did you take specific coursework related to DeafBlind interpreting/Culture?
- Yes (1)
- No (2)

Display This Question:
If Did you take specific coursework related to DeafBlind interpreting/Culture? Yes Is Selected

13. Was your coursework comprised of…
- 2 or more dedicated DeafBlind interpreting/Culture courses (1)
- 1 dedicated DeafBlind interpreting/Culture course (2)
- A component of a required specialization course (3)
- Isolated lecture/workshop (4)

Display This Question:
If Did you take specific coursework related to DeafBlind interpreting/Culture? Yes Is Selected

14. Did your coursework include any DeafBlind instructors?
- Yes (1)
- No (2)

Display This Question:
If Did your coursework include any DeafBlind instructors? Yes Is Selected
15. You mentioned your coursework included DeafBlind instructor(s). What were the names of these instructors?
- Name: (1) _____
- Name: (2) _____
- Name (3) _____
- Cannot remember name(s) (4)

Display This Question:
If Did you take specific coursework related to DeafBlind interpreting/Culture? Yes Is Selected
16. Did your coursework include an internship or other in-depth experience working with people who are DeafBlind?
- Yes (1)
- No (2)

Display This Question:
If Did your coursework include an internship or other in-depth experience working with people who are DeafBlind? Yes Is Selected

17. How many hours was your DeafBlind specialized experience or internship?
Display This Question:
If How did you learn these skills? Please check all that apply. Protactile ASL Training Is Selected

18. You mentioned you learned these skills through Protactile ASL Training. What was the name of the trainer?
- Name: (1) _____
- Cannot member name (2)
Display This Question:
If How did you learn these skills? Please check all that apply. Private training program (e.g., HKNC) Is Selected

19. You mentioned you learned these skills through a private training program (e.g., HKNC). What was the length of the training program?
Display This Question:
If How did you learn these skills? Please check all that apply. Private training program (e.g., HKNC) Is Selected

20. What was the name of this private training program?
Display This Question:
If How did you learn these skills? Please check all that apply. Private training program (e.g., HKNC) Is Selected

21. What were the name(s) of the instructor(s) at this private training program?
- Name: (1) _____
- Name: (2) _____
- Name: (3) _____
- Cannot member name (4)

Display This Question:

If How did you learn these skills? Please check all that apply. Workshops/conferences specific to working with DeafBlind individuals Is Selected

22. You mentioned you learned these skills through selected workshops/conferences specific to working with DeafBlind individuals. What was the name of the conferences?
- Name of conference (1) _____
- Name of conference (2) _____
- Name of conference (3) _____
- Cannot remember (4)

23. On a scale from 1 (No skill) to 10 (Proficient), how would you assess your ability to incorporate the following skills/knowledge into your work with DeafBlind individuals?

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	8 (8)	9 (9)	10 (10)
Understanding of DeafBlind Culture (1)		.	.	.	.	.	.	.	.	.
Orientation and Mobility (2)	.	.	.	.	.	.	.	.	.	.
Understanding of assistive listening technologies (3)	.	.	.	.	.	.	.	.	.	.
Ability to describe environment (4)	.	.	.	.	.	.	.	.	.	.
Support Service Provider skills (human/sighted guide techniques) (5)	.	.	.	.	.	.	.	.	.	.
Intervenor skills (working with children in schools) (6)	.	.	.	.	.	.	.	.	.	.

Communication Facilitator skills (i.e., in-person phone call assistance and interpreting) (7)	·	·	·	·	·	·	·	·	·	·
Understanding of the ADA in regards to interpreting access (8)	·	·	·	·	·	·	·	·	·	·

Display This Question:

If In the past year, how many hours would you estimate you have interpreted for individuals who identify as DeafBlind? I have never interpreted for DeafBlind individuals Is Not Selected

24. Are you interested in joining a national directory of interpreters who work with individuals who are DeafBlind?

- Yes (1)
- No (2)

25. How did you receive the invitation to this survey? Please check all that apply.

- Email from the DeafBlind Interpreting National Training and Resource Center (DBI) (4)
- DBI Facebook Page (5)
- Another Facebook group/page (please specify) (6) _____
- RID (7)
- RID: DeafBlind Member Section (8)
- PSDBC Listserv (Professionals serving DeafBlind Consumers) (9)
- Email from National Clearinghouse of Rehabilitation Training Materials (10)
- Email from National Center on DeafBlindness (11)
- Somebody referred me to a link to this survey (12)
- The DBI website (13)
- Other (please specify) (14) _____

26. How interested are you in getting Protactile American Sign Language (PTASL) training?

- I have not heard of PTASL but I am now interested (1)
- I have not heard of PTASL before and I am not interested (2)
- I know a little about PTASL and I would be interested (3)
- I know a little about PTASL but I am not interested (4)
- I am already skilled in PTASL but I am still interested (5)
- I am already skilled in PTASL and I am not interested (6)

In this section we are asking a number of demographic questions. Please provide your name and email address. Without this information, we are unable to accurately check for duplicates from the data and may not be able to use your data if the information is not complete. We will also be conducting an additional study at the end of the 5-year cycle to determine impact and will have information about our future trainings to share periodically. You will have the option to specify how we will use your name and email address shortly.

27. Which of the following do you prefer about future contact?
   - Yes, it is ok to contact me in the future about DeafBlind interpreting. (1)
   - Yes, it is ok to contact me in the future about DeafBlind interpreting and add my information to the shared interpreting grants general interest mailing list (e.g., Atypical Language, People of Color in Legal Interpreting settings, Mental Health interpreting). (2)
   - No, only use my name and email address to validate your data. Do NOT add me to any mailing lists. (3)
28. What is your name?
   - First name: (1) _____
   - Last name: (2) _____
   - Refuse to provide (3)

29. What is your email address?
   - Email address: (1) _____
   - Refuse to provide (2)
30. In which state do you currently reside?
   - Alabama (1)
   - Alaska (2)
   - Arizona (3)
   - Arkansas (4)
   - California (5)
   - Colorado (6)
   - Connecticut (7)
   - Delaware (8)
   - District of Columbia (9)
   - Florida (10)
   - Georgia (11)
   - Hawaii (12)
   - Idaho (13)
   - Illinois (14)
   - Indiana (15)
   - Iowa (16)
   - Kansas (17)
   - Kentucky (18)
   - Louisiana (19)
   - Maine (20)

- Maryland (21)
- Massachusetts (22)
- Michigan (23)
- Minnesota (24)
- Mississippi (25)
- Missouri (26)
- Montana (27)
- Nebraska (28)
- Nevada (29)
- New Hampshire (30)
- New Jersey (31)
- New Mexico (32)
- New York (33)
- North Carolina (34)
- North Dakota (35)
- Ohio (36)
- Oklahoma (37)
- Oregon (38)
- Pennsylvania (39)
- Puerto Rico (40)
- Rhode Island (41)
- South Carolina (42)
- South Dakota (43)
- Tennessee (44)
- Texas (45)
- Utah (46)
- Vermont (47)
- Virginia (48)
- Washington (49)
- West Virginia (50)
- Wisconsin (51)
- Wyoming (52)
- I do not reside in the United States (53)

31. Please provide us with your city and ZIP code to assist us in our federal reporting to demonstrate the reach of this survey.
City: (1)
ZIP code: (2)

32. Which of the following represents your race/ethnicity? Please check all that apply.
- White/Caucasian (1)

- Black/African American (2)
- American Indian or Alaska Native (3)
- Asian (4)
- Native Hawaiian or other Pacific Islander (5)
- Refuse to provide (6)

33. Are you Hispanic, Latino, or Spanish?
- Yes (1)
- No (2)
- Refuse to provide (3)

34. What is your gender?
- Male (1)
- Female (2)
- Trans/Non-binary (3)
- Refuse to provide (5)

35. How many years have you been interpreting?

Years: (1)

36. Do you hold any of the following certifications or state- or agency-level screenings? Please check all that apply.
- Nationally certified (e.g., RID, NAD, EIPA) (1)
- State QAST or certified (2)
- Agency screened (3)
- Other (please specify) (4) _____
- None (5)

37. Are you:
- Deaf (1)
- Hard of Hearing (2)
- Hearing (3)
- DeafBlind (4)
- Hearing & Blind (5)

Competencies - Appendix A: Needs Assessment Online Survey

Thank you for participating in the DeafBlind Interpreting National Training and Resource (DBI) national needs assessment survey to assist us in identifying current and emerging practices in the field of DeafBlind interpreting. The goal of this survey is to identify specific competencies required for interpreters who work with DeafBlind consumers. The term DeafBlind will be used throughout the survey. We recognize the combined range of hearing and vision loss and how individuals may identify differently. For our survey purposes, the definition includes individuals who are DeafBlind, deaf-blind, and/or who have a combination of hearing and vision loss, those who are late-deafened with vision loss, hard of hearing with vision loss, close vision, or are oral DeafBlind.

This survey will take about 20 minutes to complete, depending on your answers to some of the questions. You must answer the first question so we can know you have read and agree with the Consent information. You may also save your work and continue at a later time if you wish. In order to save, please finish a page and click "Next." Without this step, your answers to the questions will not be saved. **Please note that the survey will close Sunday, October 15, 2017, at 11:59pm and no responses can be accepted after this deadline.** Because this is a research project, we must provide you with information about the project and any risks involved. In order to complete the survey, you must review the brief informed consent information Next, please click on this link to the Informed consent form. It will open the informed consent form in another window. Please read it to understand your rights as a survey participant. You can also print the document. Once you have finished, click to close and return to this survey.

Q2 Please select your choice below. Clicking on the "Agree" button indicates that: - You have read the Consent information - You voluntarily agree to participate - You are 18 years of age or older
- Agree
- Disagree

Skip To: End of Survey If Q2 = Disagree

Q3 Q1. In which state do you currently reside?
▼ I do not reside in the United States … Wyoming

Skip To: End of Survey If Q3 = I do not reside in the United States

Q4 Q2. Which of the following do you identify as?
- DeafBlind
- Deaf/Sighted
- Deaf/Low Vision
- Hard of Hearing/Sighted

- Hard of Hearing/Low Vision
- Hard of Hearing/Blind
- Hearing/Sighted
- Hearing/Low Vision
- Hearing/Blind

Q5 Q3. What is your primary method of communication?
- American Sign Language (ASL)
- Tactile Sign Language (TSL)
- Protactile American Sign Language (PTASL)
- Pidgin Signed English (PSE)
- Spoken English/Oral
- Total Communication/SimCom
- Cued Speech

Q6 Q4. What is your primary relationship to DeafBlind interpreting?
- DeafBlind Individual
- Interpreter (Deaf or Hearing)
- VR Counselor
- Interpreter Educator
- Interpreter Referral Agency Personnel
- DeafBlind Advocacy Agency Personnel or Service Provider
- Support Service Provider (SSP)
- Family member
- Other (please specify) _____

Display This Question:
If Q6 = VR Counselor
Or Q6 = Interpreter Educator
Or Q6 = Interpreter Referral Agency Personnel
Or Q6 = DeafBlind Advocacy Agency Personnel or Service Provider

Q7 Q5. How long have you been in this role?
- 0-5 years
- 6-10 years
- 11-15 years
- 15-20 years
- 21 years or more

Display This Question:
If Q4 = DeafBlind
Or Q4 = Hearing/Low Vision
Or Q4 = Hard of Hearing/Low Vision

Or Q4 = Hard of Hearing/Blind
Or Q4 = Hearing/Blind
Or Q4 = Deaf/Low Vision

Q8 Q6. Which of the following school settings did you attend during K-12?
- Mainstream school with no other Deaf or DeafBlind students
- Mainstream school with a small group of other Deaf or DeafBlind students
- Residential School for the Deaf
- Residential School for the Blind
- Oral Program
- Homeschool
- Other

Display This Question:
If Q4 = Deaf/Sighted
Or Q4 = Hard of Hearing/Sighted
And Q4 = Hearing/Sighted

Q9 Q7. Which of the following school settings did you attend during K-12? Please check all that apply.
- Mainstream school with no other Deaf or hard of hearing students
- Mainstream school with a small group of other Deaf or hard of hearing students
- Residential School for the Deaf
- Residential School for the Blind
- Oral Program
- Homeschool
- Other

Display This Question:
If Q4 = DeafBlind
Or Q4 = Deaf/Sighted
Or Q4 = Hard of Hearing/Sighted
Or Q4 = Hearing/Low Vision
Or Q4 = Deaf/Low Vision
Or Q4 = Hard of Hearing/Low Vision
Or Q4 = Hard of Hearing/Blind
Or Q4 = Hearing/Blind

Q10 Q8. What method of communication did you use in school? Please check all that apply.
- American Sign Language (ASL)
- Tactile Sign Language (TSL)
- Protactile American Sign Language (PTASL)
- Pidgin Signed English (PSE)

- Spoken English/Oral
- Total Communication/SimCom
- Cued Speech

Q11 Q9. Have you ever used interpreting services?
- Yes
- No

Display This Question:
If Q11 = Yes

Q12 Q10. Which of the following do you consider to be most important for a DeafBlind interpreter to possess?
- Voicing skills
- Signing skills
- Knowledge of tactile/protactile ASL
- Positive Attitude
- Respect
- Description of environmental information and the social mood and attitude in a setting

Q13 Q11. Have you ever received Vocational Rehabilitation (VR) services?
- Yes
- No

Display This Question:
If Q13 = Yes

Q14 Q12. At what age did you first access VR services?
- 15-20
- 21-30
- 31-40
- 41-50
- 51-60
- 61-70
- 71 and above

Display This Question:
If Q13 = Yes

Q15 Q13. Are you currently receiving VR services?
- Yes
- No

Display This Question:
If Q15 = Yes

Q16 Q14. How long have you been working with your current VR counselor?
- Less than 1 year
- 1-2 years
- 3-4 years
- 5 or more years

Display This Question:
If Q13 = Yes

Q17 Q15. Have you ever used interpreters provided by VR (appointments, job shadowing, job coaching, on the job training, job interviews, career counseling)?
- Yes
- No

Display This Question:
If Q17 = Yes

Q18 Q16. Were you satisfied with the interpreting services provided when working with VR?
- Yes
- No
- Not sure

Display This Question:
If Q18 = No

Q19 Q17. Why were you not satisfied with your interpreting services provided when working with VR? Please check all that apply.
- They were not highly skilled
- I did not get to choose my interpreter
- They were not available when I needed them
- They didn't have knowledge about the VR system
- I'm not sure

Display This Question:
If Q17 = No

Q20 Q18. Why have you not used an interpreter provided by VR? Please check all that apply.
- My counselor is able to communicate with me fluently
- I do not use interpreters
- They were not available when I needed them

- I was not aware of my communication choices

Q21 Q19. Are you currently working as an interpreter?
- Yes
- No

Q22 Q20. Are you a certified interpreter?
- Yes
- No

Q23 Q21. Did you complete an Interpreter Education Program?
- Yes
- No

Q24 Q22. What is the highest interpreting degree that you earned?
- Certificate
- AA
- BA
- MA
- PhD

Q25 Q23. When did you graduate?
- 1970-1980
- 1981-1990
- 1991-2000
- 2001-2010
- 2011-2017

If Q21 = Yes

Q26 Q24. Do you currently provide interpreting for DeafBlind individuals?
- Yes
- No

Display This Question:
If Q26 = Yes

Q27 Q25. What methods of communication/languages do you use when you interpret for DeafBlind individuals? Please check all that apply.
- American Sign Language (ASL)
- Protactile American Sign Language (PTASL)
- Tactile Sign Language (TSL)
- Close vision interpreting
- Oral interpreting
- Haptics/Touch Signals
- Cued Speech
- Other (e.g., draw pictures, gestures, use props)

Display This Question:
If Q26 = Yes

Q28 Q26. Over the past year, how many hours did you provide DeafBlind interpreting?
- 0-5 hours
- 6-10 hours
- 11-20 hours
- 21-30 hours
- 31-40 hours
- 41-50 hours
- 51-100 hours
- 101-200 hours
- 201-300 hours
- 301-400 hours
- 401 hours and above

Display This Question:
If Q26 = Yes

Q29 Q27. Where did you receive your training to work with DeafBlind individuals? Please check all that apply.

- DeafBlind community members/Social activities
- Interpreter Education Program/Interpreter Training Program
- Workshops/Trainings/Conferences

- Other experienced DeafBlind interpreters
- ⊗I did not receive any training

Display This Question:
If Q29 = DeafBlind community members/Social activities
Or Q29 = Interpreter Education Program/Interpreter Training Program
Or Q29 = Workshops/Trainings/Conferences
Or Q29 = Other experienced DeafBlind interpreters

Q30 Q28. How satisfied are you with the amount of training you received to interpret for DeafBlind individuals?
- Extremely satisfied
- Very satisfied
- Somewhat satisfied
- Somewhat dissatisfied
- Very dissatisfied
- Extremely dissatisfied

Display This Question:
If Q30 = Somewhat satisfied
Or Q30 = Somewhat dissatisfied
Or Q30 = Very dissatisfied
Or Q30 = Extremely dissatisfied

Q31 Q29. Are you interested in receiving more training to interpret for DeafBlind individuals?
- Yes
- No
- Not sure

Q32 Based on our research, we have identified the following Competencies (knowledge and skills) interpreters should possess when interpreting for DeafBlind individuals. Read each statement carefully and rate how important the Competency is to you, using a scale from 1 (not being important) to 10 (very important), and how often you see interpreters demonstrating the Competency. Here are two definitions that will assist you: **Protactile ASL** is an emerging tactual language, borne out of American Sign Language, with its own linguistic features and cultural parameters, distinct from ASL. PTASL interpreting utilizes the receiver's hands and body as a reference for communication, conveying information and affirming the DeafBlind individual's autonomy through touch. **TASL** is a modality that makes the reception of visual ASL accessible through touch.

Q33 Q30. Please rate each competency in terms of its importance to you; then rate how often you see interpreters demonstrate the competency.

	Importance of Competency	See interpreters demonstrate Competency

	1 (Not important)	2	3	4	5	6	7	8	9	10 (very important)	Almost always	Very often	Often	Not often	Almost never
Knowledge and understanding of hearing loss and vision loss.															
Knowledge of different types of communication options and techniques needed for tactile communication, and the ability to match an individual's language preference (signed languages, close vision/tactile, haptics)															
Respect for diversity in the DeafBlind community															
Respect for DeafBlind individuals' autonomy - making their own decisions															

Knowledge and understanding of accessibility and how to use various technologies (e.g., ALDs, Visual description, orientation and mobility)																	
An understanding of the different interpreting demands between visual ASL and tactile ASL (e.g., adding visual or audio description of the visual environment)																	
Fluency in ASL, TASL, and PTASL																	
Familiarity with Vocational Rehabilitation and its various settings/comm unity partners (e.g., (appointments, job shadowing, job coaching, on the job training, job interviews, career counseling)																	

Q34 Q31. Please rank these eight Competencies in terms of their importance, with 1 = highest in importance and 8 = lowest in importance.
_____ Knowledge and understanding of hearing loss and vision loss.

_____ Knowledge of different types of communication options and techniques needed for tactile communication, and the ability to match an individual's language preference (signed languages, close vision/tactile, haptics)

_____ Respect for diversity in the DeafBlind community

_____ Respect for DeafBlind individuals' autonomy - making their own decisions

_____ Knowledge and understanding of accessibility and how to use various technologies (e.g., ALDs, Visual description, orientation and mobility)

_____ An understanding of the different interpreting demands between visual ASL and tactile ASL (e.g., adding visual or audio description of the visual environment)

_____ Fluency in ASL, TASL, and PTASL

_____ Familiarity with Vocational Rehabilitation and its various settings/community partners (e.g., (appointments, job shadowing, job coaching, on the job training, job interviews, career counseling)

Q35 Q32. If you would like to be contacted about future training opportunities please provide the following information:

- First name: _____
- Last name: _____
- City: _____
- State: _____
- Zipcode: _____
- Email address: _____
- ⊗Prefer not to provide

Q36 Q33. Which of the following represents your race/ethnicity? Please check all that apply.

- White/Caucasian
- Black/African American
- American Indian or Alaska Native
- Asian
- Native Hawaiian or other Pacific Islander
- ⊗Prefer not to provide

Q37 Q34. Are you Hispanic, Latino, or Spanish?

- Yes
- No
- Prefer not to provide

Q38 Q35. What is your gender?

- Male
- Female
- Trans/Non-Binary
- Prefer not to provide

Q39 Q36. What is your age?

- 18-21
- 22-30
- 31-40
- 41-50
- 51-60
- 61-70
- 70 and above
- Prefer not to provide