

Michigan Coalition for Deaf & Hard of Hearing People

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Sign Language Interpreters; Are They Really Necessary?

Did you know that there are approximately 32 million Deaf and Hard of Hearing people in this country? There are approximately 1.4 million Deaf and Hard of Hearing people in Michigan. Many of these individuals use American Sign Language as their primary mode of communication. How do you service them? Do you know what to do if a deaf person requests a Sign Language Interpreter?

Without a Sign Language Interpreter a doctor or other health care professional may not be able to communicate effectively and may not understand the patient's history and symptoms. This leads to misdiagnosing the patient's problem and prescribing inadequate or even dangerous treatment. Deaf patients may not understand medical instructions, warnings or prescription guidelines without an interpreter.

Title III of the Americans with Disabilities Act (A.D.A.) prohibits Health Care providers from discriminating against deaf and hard of hearing people in places of public accommodation which would include any professional office of a health care provider, regardless of the size of the office or the number of employees. Health Care Providers must make their services accessible to individuals who are deaf/hard of hearing. What does this truly mean? Remove any barriers to communication. According to the ADA, doctors and health care providers must make sure that communication happens "effectively" by providing "auxiliary aids and services" to assist in the communication process. "Auxiliary aids and services" may include qualified Sign Language Interpreters, transcription services, written materials, TTY/TDD, telephone handset amplifiers, personal amplifiers, FM units, television decoders and telephones that are compatible with hearing aids. For individuals who use primarily Sign Language, Interpreters are often necessary to provide safe and effective medical treatment to a deaf patient.

How can it happen that the deaf person would not be able to read lips or write back and forth? When someone is trying to lip read, they are getting at best 30% of the information. Why? Because 60% of spoken English is made at the back of the throat and only 40% is made on the lips. Of that 40% that is made on the lips, 20% of the words look exactly the same. If you have an accent, you make your words differently on your lips and the deaf person is not accustomed to how you make your words. If you have a mustache or beard, they cannot see your lips and your lip movement is impaired or different. Writing back and forth may be unacceptable because most often English is the deaf person's second language. The average

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reading level of the deaf population in the United States is fourth grade. American Sign Language (ASL) and English are very different. ASL has its own grammar and syntax and is unlike English.

That's O.K. we can just use a family member! The United States Justice Department defines a “qualified interpreter” as someone “who is able to interpret effectively, accurately and impartially both receptively and expressively, using any necessary specialized vocabulary”. Most family members or friends may not have the skill or specialized vocabulary to be able to interpret in a medical setting both accurately and effectively. Family members and friends may not be able to provide impartial or confidential interpreting. There are too many emotions involved. They have no obligation to provide impartiality or confidentiality. Many times deaf individuals will not be as honest with family or friends interpreting for them, so you do not get all the information you need for appropriate treatment.

If I decide to use an interpreter, how much do I charge the deaf person? You cannot charge the deaf person for providing Sign Language Interpreter services. It is a cost of doing business. You may be able to get a tax credit under IRS Code Section 44, Disabled Access Credit. Small businesses may take an annual tax credit for making their business accessible to not only Deaf and Hard of Hearing individuals by providing interpreters, but to all persons with disabilities. Please check with your tax professional to make sure you qualify for this credit.

Providing Interpreters may seem the first time to be a daunting task. The unknown always is. However, if you provide this service it will expedite your communication with Deaf and Hard of Hearing individuals, actually saving you time and money.

According to the U.S. Justice Department, some examples of situations where a Sign Language Interpreter may be necessary are; obtaining medical history, getting informed consent or permission for treatment, explaining a diagnosis, treatment and prognosis of an illness, conducting psychotherapy, communicating before and after a major medical procedure, explaining medication, explaining medical costs and insurance issues and discussion of patient care upon discharge from a medical facility.

If you do not provide an interpreter, and the deaf person feels that they were not able to communicate effectively, they have recourse under the law. They may contact and file a complaint with the U.S. Justice Department, the Michigan Department of Civil Rights, Michigan Protection and Advocacy and the Michigan Licensing Bureau.

The goal of this article is to give you some understanding of the deaf and hard of hearing population's needs and the importance of effective communication. Please consider the rights of the deaf person when making a decision on how to communicate with them. The U.S. Justice Department always recommends that you consult with the deaf person and accommodate their request. Writing back and forth can become very

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time consuming, lip reading leads to many misunderstandings and can be very frustrating and time consuming, using an interpreter you will communicate much quicker, allowing you to not only get accurate information, but allowing you to get on to the next patient. You may contact E-Michigan for additional information at: info@michdhh.org

The Statistics in this article were provided by Gallaudet University, Washington, D.C.

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