

SSC Reflective Assignment

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WORD COUNT 1398
CHARACTER COUNT 6882

TIME SUBMITTED
PAPER ID

24-MAR-2013 01:39PM
22808620

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Student Selected Component (SSC) Reflective Summary

Words: 1350

For my year two SSC, I chose to volunteer at DEAFvibe, a local deaf-led charity for deaf, hard of hearing, deafened, and deafblind people. Its founders are Mrs Rowan Robinson and Mrs Ali France both of whom are profoundly deaf themselves. In addition to their philanthropic work, they both hold full-time posts as Rehabilitation Officers within social care and health. Consequently, they are uniquely able to provide a combination of expertise and empathy to the deaf people of Stoke-on-Trent. I have been genuinely humbled by their tireless enthusiasm and dedication to a cause close to their hearts. It has reminded me of what I can do now and what I may be able to do in the future, on top of my practice. At the beginning of my SSC placement, I had a limited understanding of normal hearing and even less knowledge about types and reasons for deafness. In addition, I had no perspective on how being deaf can impact a person's mental health, happiness, and prospects. During my time at DEAFvibe I learned a great deal about all of these areas.

DEAFvibe is a charity where deaf people can obtain accurate information, support, and advice on a wide variety of issues affecting their daily lives. For instance, on my first placement day, a local MP and a social welfare expert were speaking about the austerity led changes to the benefit system and how this might affect deaf people. Essentially, we were told that it would be harder to prove that you couldn't work and that even if you did manage to prove incapacity, you would get less money. At this point, a number of DEAFvibe members recounted their personal experiences. I felt both sad and angry at the injustices I heard about. I felt emotional because many of the DEAFvibe members want to work but simply haven't been given the tools necessary or alternatively, employers are not making the reasonable adjustments required by law (The Equality Act, 2010). In addition, during my time at DEAFvibe, a wider issue was nagging at me and its one that I feel not enough people are talking about it. I do not belong to a faith but I recently read a quote by the newly appointed Archbishop of Canterbury which succinctly sums up how I feel: "As a civilised society, we have a duty to support those among us who are vulnerable and in need. When times are hard, that duty should be felt more than ever, not disappear or diminish" (Welby, 2013). The Archbishop's comments were sent in a letter to the Telegraph which brings me nicely on to why I felt angry. In my opinion, the media (and politicians for that matter) have played no small part in making the words "welfare" and "benefit" synonymous with derogatory terms such as "scroungers" and "fraudsters". Looking around the room, I didn't see anyone fitting this portrayal. I saw people who wanted to contribute to society but found a system that continuously puts up barriers inhibiting their participation.

DEAFvibe is also a place for deaf people to try specialist equipment to assist their daily living. For instance, every second Friday, people can try a number of different makes/models of telephones specifically designed for those with hearing difficulties. This is important because as I found out, deaf people can feel incredibly isolated and cut-off from the world. I spoke to a lady who became deaf later in life and upon finding herself unable to communicate with her young grandchildren she became (quite understandably) depressed. I also learnt about specialist fire safety equipment. Naively, I had never considered that a deaf person might not hear a standard fire alarm. The charity educates its members about fire safety and points them in the direction of helpful equipment (e.g., alarms that ring at variable frequencies). It does not sell/make a profit on any of this technology.

As I have mentioned, this charity helps and supports local deaf people in a variety of practical ways. Mainly, however, DEAFvibe is a place where people with similar impairments can get together and communicate without the barriers they experience on a daily basis. During my placement, I read a book called "Everyone here spoke sign language" by Nora Groce. The book describes the relatively sheltered population of Martha's Vineyard, an island not far from Cape Cod, America. Until recently, there was an extremely high rate of profound hereditary deafness amongst the vineyarders. Interestingly, outsiders were surprised to discover that the deaf members of the community held just as important posts (town politics, church affairs, teaching etc) as those that could hear. This was possible because everyone on the island grew up learning to sign. The book reaffirmed for me the social model of disability – the idea that anyone can have an impairment but it is society that disables us and prevents us from becoming an integral part of a community. On my first day at DEAFvibe I felt as though I had an impairment as I can't sign and therefore couldn't communicate with everyone. On reflection, I can see this is ironic as deaf people feel this way all the time.

Implications for my future practice

Anecdotal evidence suggests that Doctors all too often talk in medical jargon that is neither helpful nor reassuring to a patient. Relatively few hearing people understand the seemingly endless scientific terminology that some doctors use. With this in mind, when talking to patients in the future, I will use clear and concise language. I will do this regardless of whether or not they are deaf though; there is a myth that suggests that deaf people are slow or stupid. A deaf person can't hear but they can process, analyse and evaluate perfectly well (providing there is no accompanying impairment). In fact, I found that deaf people have very often got greater powers of analysis and deduction as they have been forced to develop these skills.

During my time at DEAFvibe I picked up some basic sign language skills (how to say please, thank you, tea, coffee, etc). I have subsequently decided to go on a sign language course in the summer to further develop this. I want to do this because many deaf people consider their first language to be sign, English their second. This

was a new and thought provoking concept to me. I wouldn't expect a man from China or a woman from Argentina to automatically speak English, so why would I expect a deaf person to speak and lip read?

On one placement day I was told a true story that really moved me and one that will definitely influence my future practice. It was recounted by a man who described the final few months he experienced with his dying father. The man's father was profoundly deaf and had recently been diagnosed with cancer. The son was hearing, could also sign, and took his father to all of his appointments at the oncology department. On every visit to the hospital, the son pleaded with the hospital staff to book an interpreter so that he would be free to provide the emotional support that his father so desperately needed. Despite attending countless appointments, the doctors consistently failed to book an interpreter. In the end, it was left to the son to tell his father that the cancer had spread and that it was terminal – in short, he had to tell his dad that he would die soon. This is not right and if I can help it I won't let this happen when I am qualified.

On a number of occasions I felt very emotional whilst listening to the stories of DEAFvibe members. Being born deaf or becoming deaf can make a person feel extremely isolated and they may go on to develop depression as a consequence. But it doesn't have to be like that. Through the work of charities like DEAFvibe who raise awareness amongst healthcare professionals, policy makers, and the general public, I see no reason why deaf people can't be as fundamental to our society as they were in Martha's Vineyard.

References

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