

# Healthy Signs



National Center for Deaf Health Research

Summer 2006

## Perspectives:

### Mission of NCDHR:

To promote health and prevent disease in the Deaf population through community-participatory research.

### “Did you Know?”

There is an interesting article entitled, “Research with Deaf People: issues and conflicts” by Charlotte Baker-Shenk of the University of Bristol, United Kingdom. The article articulates the issues between researchers and the Deaf community. To get a copy, contact NCDHR Office.

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One rainy Saturday afternoon, out of boredom, I turned the TV on. The PBS Channel 21, WXXI, was the most interesting with cooking show after cooking show. All of them were captioned. Then a program called Second Opinion came on. It was a real life medical talk show with a group of doctors, along with a patient who asked questions and made comments about a specific health problem. The Case Study of the week was a patient with a mole on her arm. The discussion included: how a doctor determines the type of mole it is by its description, whether it could be cancer or not, its potential to become cancer in the future, testing and treatment options.

All of this is important information for everyone,

especially the recommendation “See your Doctor if...” Unfortunately, this program was **NOT** captioned!

TV programming is one important source of health information. For people who rely on visual information, TV without captioning results in critical information that is missing or misunderstood.

Fortunately the captioning issue was resolved with a call to PBS Channel WXXI and the corporate program sponsor.

Captioning can be improved for easier reading and understanding. The real questions remain. What health information have Deaf and hard of hearing people been missing or misunderstanding? What needs to be done to level

the healthcare playing field so we can better care of ourselves and know when to seek care that might be life-saving.

The NCDHR’s community-based research will hopefully shed some light on this very real problem of unknown depth and degree for all Deaf and hard of hearing people.

Check your TV guide and watch “Second Opinion” to learn more about health problems presented as case studies, all with captioning.

*By Mary Chizuk, RN  
NCDHR Evaluation  
Committee Member*

## Message from the Editor:

Welcome to the first issue of “Healthy Signs,” an electronic newsletter of the NCDHR!

Each month, our center has 7 committees that meets a total of at least 10 hours, followed by at least 18 pages of meeting notes! As you can imagine, trying to keep informed with everything can be quite a challenge.

By providing each and every one of you with an internal source of information on a quarterly basis, I hope to highlight what has been happening here at the center.

In the Perspectives feature, we will ask members of our center to share their personal experiences and/or thoughts pertaining to

health and healthcare issues.

Any announcements or news are welcome. Please feel free to submit information for our newsletter.

Your comments and feedback related to this newsletter are welcome!

*Matthew Starr, MPH  
Editor*

## Center Updates



Dr. Pearson giving a welcome remarks to External Advisory Committee (EAC), Evaluation and DHCC members at the NCDHR Dinner, May 8, 2006. Carolyn Lomeo interpreting.

► The Center successfully secured an additional \$42,307 from the CDC for resources necessary to develop a computerized version of the ASL Health Survey.

► The NCDHR website has been replaced with an updated, Deaf-friendly website at [www.urmc.edu/NCDHR](http://www.urmc.edu/NCDHR). This website is still undergoing upgrades and will soon include several ASL video clips.

► Our Center's logic model was one of the three highlighted during the National PRC Evaluation training last March 20, 2006.

Nearly 250 people from all 33 PRCs attended this training session. The logic model is shown in the NCDHR website.

► Monroe County's Youth Risk Behavior Survey (YRBS), a 96-question pencil-and-paper survey targeted to high schoolers, was conducted Fall 2005. As an historical first, two questions identifying whether there are D/deaf family members in the household, have been included as part of the survey. The Research Subcommittee is now analyzing the data.

► Three Videophones (VP) are located at NCDHR offices. One VP is available for the public. Contact Heather Pavey, our NCDHR Secretary, for more information and/or instructions on how to use VP.

► Patrick Graybill, Vice-Chair of DHCC, was honored with the Community Service Award (CSA) from the Rochester Deaf Rotary Club on June 2006. Past CSA recipients are Vicki T. Hurwitz, also a member of DHCC, and Robert F. Panara. Congratulations, Pat!



Jackie Schertz and Ken Kelbaugh (DHCC) mingle with Marcia Dugan (EAC) and Mary Chizuk (Evaluation) at the NCDHR Dinner.

## Deaf Strong Hospital

Deaf Strong Hospital (DSH), a role-reversal exercise for first year medical students, is planned for September 8, 2006. In this role playing, the medical students are "patients" who seek medical attention from doctors, who are ASL users from the Rochester Deaf community.

Overcoming and understanding communication challenges are the main objectives of this exercise. Additionally, the medical

students realize that culturally Deaf people do not view themselves as "disabled."

DSH was originally conceived by medical students from PAH! MD (Promoting Awareness in Healthcare, Medical and Deaf) and a member of the Deaf community, from 1998 through 2002. This year, DSH is being revived by NCDHR, with the help of Dr. Thomas Pearson, Principal Investigator of NCDHR, who teaches

Mastering Medical Information (MMI) to 1st year medical students.

NCDHR's Deaf Health Community Committee (DHCC), consisting of members of the ASL community, along with clinicians, will play a key consulting role to enhance the educational value of this program.

## Announcement: Education & Training

This newsletter was supported by Cooperative Agreement Number 1-U48-DP-000031 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the editor and do not necessarily represents the official views of the Centers for Disease Control and Prevention.

Sally Trafton, Chair of the NCDHR's Education and Training (ET), retired after a long and distinguished tenure in the Department of Community and Preventive Medicine (DCPM).

Her organizational skills and experience have been instrumental in shaping the early development of NCDHR, and we sincerely thank her for helping us get started on the right track. Sally will continue

to work with us in the development of the hard of hearing community committee.

Nancy Chin, PhD, MPH, Assistant Professor in the DCPM, will assume Sally's roles as Chair of the ET Subcommittee and member of the Executive and Evaluation Committees.

Nancy is an anthropologist, and her research has focused on the social and cultural

determinants of health. She regularly teaches courses for medical and public health students, and is taking on the role of Associate Chair for Education within DCPM.

Please join us in welcoming Nancy to the NCDHR and in thanking Sally for her past and ongoing efforts with us.

*Thomas A. Pearson, MD, MPH, PhD*