

Healthy Signs



UNIVERSITY of
ROCHESTER
MEDICAL CENTER

MEDICINE of THE HIGHEST ORDER

National Center for Deaf Health Research

March 2009

Mission of NCDHR:

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

NCDHR Website Stats:

During the 64 days between December 1, 2008 and March 2, 2009, **3,140** (unduplicated) individuals have viewed the NCDHR website (www.urmc.edu/ncdhr). This translates to 49 individuals accessing the website per day.

The NCDHR website has a page listing of links to other "Deaf-friendly" websites.

If you know of any other websites that should be listed, let us know!

Your feedback on the NCDHR website is always welcome!

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Town Hall Meetings: Bridging NCDHR & Deaf Community Together

On March 18 and 20, NCDHR presented some of the findings from the Deaf Health Survey (DHS) to members of the Deaf community.

As a community-based participatory research (CBPR) center, NCDHR works closely with the Deaf community to improve the health of Deaf people. One of the principles of CBPR is to ensure that research findings are shared with the Deaf community.

A total of 30 people from the Deaf Health Community Committee, the Deaf community and NCDHR saw **Dr. Steven Barnett's** presentation about the Deaf Health Survey. He explained that the data are now being analyzed and are in the process of being published. Survey findings were compared with findings from another survey conducted



with hearing people in Monroe County. This comparison method was utilized to identify "health disparities," which are differences in health between populations. Disparities are often the best targets for improving the health of a population.

Dr. Barnett cautioned that survey findings from our area may not reflect other Deaf communities elsewhere in the United States. Each Deaf community may be different.

Findings such as demographics of the survey respondents (for example: what was the average age),

healthcare, prevention services (for example: mammography, colonoscopy, etc.), health issues such as diabetes, high blood pressure and heart disease plus more were shown on slides.

Many questions and comments from the Town Hall meeting attendees were discussed and recorded.

NCDHR is grateful to everyone who attended the Town Hall meetings. More



meetings are planned in the near future for anyone interested in learning more about the DHS and research plans.

New Community Partners Needed! John T. Reid



The Deaf Health Community Committee (DHCC) is now recruiting new members!

DHCC is a community partner of National Center for Deaf Health Research at the University of Rochester. DHCC membership is diverse, consisting of individuals with various backgrounds and experience. We provide a vital link between the Deaf community and an academic institution (University of Rochester). This link (or partnership) is highly beneficial to the Deaf Community. In other words, by combining the knowledge from public health along with DHCC's DEAF-WORLD expertise, Deaf Health research results will be produced

with a high degree of cultural competency.

As the DHCC's Vice-Chair, one of my responsibilities is to recruit interested persons to participate in this exciting opportunity to discuss ways to improve the health of the Deaf community. We are looking for people who are motivated to help the Deaf Community as a member of DHCC. Medical expertise is **not** required! The only experience we are seeking is the ability to speak out and advocate for better health of all Deaf people and their families.

If you are interested in joining the DHCC or want more information, please contact Matthew Starr at 866-634-7863 VP.

Medical Student Intern at NCDHR Mark Scheible



Mark Scheible is a medical student at the University of Rochester where he is the first student to complete the new Deaf Health Pathways (See Deaf Health Pathways on December 2008 Healthy Signs newsletter).

As part of the Pathway, a medical humanities class, Mark has been doing a research project at NCDHR using the college health survey data to look at trends in HIV testing and education in the Deaf community. Mark met with DHCC and other Deaf community members to refine his

research question. Analysis of the data is currently underway.

As a second project for the Community Health Improvement Clerkship requirement for all UR medical students, Mark is helping with a project started by a fellow student, Heidi Thompson, to bring more health information to the web in ASL and other more accessible formats than English text. Featured in this project will be a new website (www.healthysigns.org).

The website will expand the previous project's blog which provided information in ASL and links on

various medical topics. The video on obesity featuring a doctor and patient having a conversation in ASL. The project will be the foundation for an on-going group called "Healthy Signs Student Group" to keep medical students active in promoting Deaf health.

Mark is a native of Rochester having moved back after living in Seattle, Washington and Brooklyn, New York. He studied ASL after college for three years while in Seattle. He has greatly enjoyed being at the NCDHR and being immersed again in ASL!

EHDI 2009 Conference Deirdre Schlehofer



On March 9-10, 2009, at the 8th annual Early Hearing Detection and Intervention (EHDI) Conference in Dallas, **Deirdre "DD" Schlehofer** and **Steven Barnett** gave presentations "Surveying adults deaf since childhood: Identifying and addressing disparities through community-based

participatory research" and "Health outcomes for deaf children: Results of a survey of deaf adults" respectively.

The conference goals are to work effectively with families, professionals, state health departments and non-profit organizations, and to interpret and describe current research and research methods related to EHDI.

The NCDHR presenters attended the New York State team meeting, along with other Deaf professionals from the Rochester School for the Deaf and RIT.

In terms of conference accessibility, ASL interpreting services and CART were provided in every session, allowing full participation for all attendees.

Topics ranged from working with families to collaborative partnerships across the EHDI continuum, as well as an United Kingdom study of deaf children and their families, and an update from the Joint Committee on Infant Hearing (JCIH). The conference provided a good networking opportunity and made progress in bridging the Deaf-hearing gap in research of this nature.

The Benefits of Having a Staff Interpreter Kim Kelstone



Since joining NCDHR 3 months ago, I have lost count of the people, both ASL and English users, who have expressed their thanks and relief that NCDHR has hired a staff interpreter. People have noticed things they didn't even realize were missing, especially "spur of the moment" conversation and "overhearing" what's going on. Communication has improved dramatically, allowing people to interact daily with less effort.

One visiting medical student was able to adopt a CBPR approach on his short-term research project, and work quickly with a number of NCDHR staff and community partners, because he did not have to wait the 2 weeks required to schedule an interpreter. With the staff interpreter, our faculty, staff and community partners have been able to attend, participate in and benefit from local and national meetings at a level formerly not possible.

Research jargon and vocabulary like CBPR, R01, PRC, PI, NHLBI and qualitative analysis are necessary part of my vocabulary here at NCDHR. Building a strong

content foundation has proven to be a time and energy saver for everyone, while also allowing for richer interactions between Deaf and non-signing colleagues. The staff interpreter is able to represent staff and faculty in their professional language, which places everyone on a more level playing field.

If it happens that you are involved in a meeting where an interpreter is present, please consider these simple guidelines:

- Be yourself! Speak naturally with your normal pace, rhythm and volume.
- If you have handouts, slides, or plan to read from a document, a copy for the interpreter is always helpful.
- Address the Deaf person directly, even though they will look at the interpreter while you're speaking to them. It is best to look at the Deaf person while they are talking to you, even though the interpreter is speaking.